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WHAT SCIENCE IS DOING FOR THE LEPER

By MARY MOSS

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No ONE with capacity to thrill at courageous deeds should undervalue the sacrifice of Father Damien, but it has been softly whispered here and there that if the devoted Belgian had taken a little more stock in mundane precautions, refrained from eating out of the lepers' dishes and sharing their sleeping-quarters, his precious life need not necessarily have been sacrificed. Although occasionally enthusiasts elect to live—and die—in some distant leper colony, even among nurses there is an exaggerated horror arising from the terrifying legendary associations. More than one girl who unquestioningly serves her shift in crowded consumptive wards would hesitate at rendering the smallest service to a leper.

Although fully imbued with every popular superstition on this subject, I could not resist an opportunity to examine the government hospital in Spanish Town, Jamaica, where some three hundred cases of this disease are segregated. Primarily, of course, the object of the hospital is to segregate them from the community at large, as even the firmest believers in its non-contagious character do not advocate allowing ignorant and careless lepers to roam at large. In Jamaica incarceration is compulsory for all cases unable to furnish security that the strictest precautions shall be observed at home. The secondary object is to facilitate study of the etiology of this unconquerable scourge.

The doctor in charge, a vigorous young Jamaican of Scotch parentage, himself drove us out a long, white road, stretching indefinitely through scrub woods and logwood groves away from all habitations into the flat, dusty country. Finally we drew up before a gate in a high brick wall evidently surrounding many acres of land. In answer to the doctor's summons the folding wings were thrown open by a leper; in fact, all

the work of this establishment, except that of the doctor, his assistant, and a chemist, is portioned out among the inmates.

Inside was a grassy inclosure shaded by large, unfamiliar trees—cottonwoods, mangoes, breadfruits; scattered about were pavilions, either open at both ends or with one side of columns, not solid walls. Immaculate whitewash and the universal polished hardwood floor of Jamaica gave an air of dairy-like cleanliness. The small white beds were empty, the patients sitting here and there or strolling under the trees. It is better not to describe those battered derelicts, who show less semblance of humanity than the gnarled, misshapen sting on an oak-tree. Some had hands and feet, some had not. It was the same with faces. Yet to the doctor's genial, "How are you to-day?" each answered cheerfully in the hoarse, characteristic leper's voice, "Not too bad, massa." Then would follow a little matter-of-fact conversation about symptoms, never a complaint. Soon we were followed by a friendly troupe of such as could hobble, one stalwart fellow carrying on his head a great basin of disinfectants. Whenever the doctor touched a patient, instantly, with the mechanical movement born of infinite repetition, he washed his hands.

In the women's division we found the same cleanliness, the same absence of complaint, the same spectres.

Three sisters, whose collapsed figures and strange, leonine facial deformity showed an advanced stage of illness, looked like fabulously ancient crones; the eldest was but twenty-seven. One woman was squatted on the floor, crooning Heaven knows what African incantation.

"Well, Sarah," asked our guide, "what have you in that jug?"

"Oh," she answered gayly enough, "massa doctor knows. Day hot; thunder-ball keep drink cool."

A thunder-ball the doctor explained to be a smooth, round stone, the possession of which in the negro imagination is the equivalent of unlimited free ice tickets.

In a community of this kind, where many patients come in the initial stages, suffering no pain and little discomfort, with a possible fifteen years of life ahead, occupation is a necessity. So, as there is no fear of their contaminating one another, all cooking, cleaning, even much of the nursing, is done by the lepers, and still there is too much idleness. Feeling this, Dr. N. not only sees to their physical comfort, and keeps himself abreast of the latest scientific experiments, but has time and spirit to remember that each outcast has human need of daily interest.

To lessen the dreariness of their lifelong leisure he has turned farmer, and teaches them to raise fruit and vegetables, which they sell—

quite harmlessly—to the hospital. His questions showed him wonderfully in touch with the work of each patient, remembering without fail who had planted yams, whose plantains were hopeful, who was the proud owner of a clump of tobacco. Seeing this content, it was hard to realize that under a former administration the inmates occasionally grew unmanageable. There is a shocking story of a riot, when, led by a half-mad cripple, the whole colony got out of hand, threatening to escape. The Royal Jamaican Constabulary were called in, but their chief, an Englishman who might have sat as model to Kipling or Ouida, recounted with much simplicity, "Being afraid my men might club the poor devils, I tried to capture the ringleader myself!" A powerful negro, this wretch fought desperately, but the chief was strong enough to master and thrust him into a punishment cell, and would have closed the door on him but for the man's poking his stump of a wrist through the crack. Crushing would not have been painful, owing to the anæsthetic character of leprosy in certain phases, but the Englishman couldn't bring himself to shut the door on flesh and bone. In the tussle that followed before the rebel was overcome he attempted to bite through the chief's thick uniform. Failing this, he made efforts in another direction, hissing out: "I'll spit in your eye! I'll make you a leper like me!" And all this was told so simply! It was just in the day's work, ordinary, paid professional service, without an idea of heroism. Before my visit was over I saw an example of the power which remains to cripples who seem hardly strong enough to live another day. At the door of a great, mediæval-looking cook-house we were joined by an East Indian cooly man, straight-haired, straight-featured, with no visible mark of leprosy. He was half stripped, and ran towards us like a frightened partridge, pouring out a voluble flood of his native language. Listening with a smile, the doctor interpreted: "Jotân has given him a licking. Poor old man, he's really out of his head, but I can't bear to shut him up. He ought to be harmless enough. You wouldn't think he could tear the clothes off this fellow's back."

Just then we heard cries that could only be called blood-curdling, and a horror scuttled into view—a fierce old man, not disfigured, but wasted, his body contorted to the shape of an inverted W. Half sitting, nearly naked, he crossed the grass at an incredible pace, his sunken eyes glowing with hate, and screaming out a torrent of curses, the exact meaning of which was luckily veiled in Hindoostanee. Once in a while, as if fearing we might miss his intention, he would ring out the words:

"Blood! Blood!"

It was no wonder his quarry fled up some steps which Jotân's ankylosed joints could not mount.

A pretty little mulatto boy not fourteen, with no outward blemish, shyly whispered to the doctor, who answered,—

"By all means, Quasshie, show the visitors your costumes."

Then they led us to another pavilion, bright with the inexhaustible sunshine, and from a great chest this hobgoblin crew pulled out gay cotton robes, tinsel crowns, and a sceptre.

"It's 'Richard the Third,'" murmured the doctor. "They played it at Christmas. Yes, I drilled them myself and designed the clothes; they sewed them."

"Missus, I was de queen," said a faceless creature with happy pride. ("He wore a mask," whispered the doctor.)

One limped forward, saying, "I was de Duke ob Buckingham."

"Dis is de king's crown; I wore it." This player lacked hands, but managed, with stumps, to hold out the crown for us to admire.

Quasshie, the pretty little mulatto boy, roguish, merry, doomed, had been cast for a messenger.

The patients seemed as little conscious of misery as the doctor of danger. Nothing could have been more matter-of-fact. His business was to study the disease and care for its victims, that was all. Moreover, the experience of many years convinced him that intelligent precautions minimize the chances of infection. Dr. N. has not yet discovered the bacillus of leprosy, but declares that he lives in hopes of doing so, and perhaps living in hopes may be, on the whole, as helpful to the lepers as dying for them.

FEEDING AND THE USE OF RESTRAINT IN CARING FOR THE INSANE

(Continued from page 4)

By FLORENCE HALE ABBOT, M.D.

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SECOND PAPER—RESTRAINT

THE question of the use of restraint in the care of the insane is one about which there has been and still is a great deal of discussion. In former days much restraint was used, and that very inhuman and often unnecessary. Let us be thankful that the days of the chain and the anklets are forever gone in all civilized countries. Many authorities hold that no mechanical restraint should be used, and rely entirely on the strength, forbearance, and even temper of attendants and nurses in controlling violent or suicidal patients. Others hold that manual restraint allows opportunity for, and even invites, abuse on the part of

the attendants towards their irresponsible but oftentimes very trying charges. Manual restraint of excited and violent patients often makes them worse, and they struggle more than they would if safely secured by some harmless but effective mechanical devices. The golden mean between artificial and purely manual restraint seems to many the safest. It is certainly rarely feasible to care for homicidal and suicidal patients in acute stages of disease without other restraint than manual, as it is seldom possible to afford the number of attendants necessary to keep the patient from harming himself and others. An excited patient will easily exhaust two or three strong nurses if they are not allowed to use mechanical restraint.

Restraints are indicated and advisable in the following cases:

In acute maniacal conditions, where patients are rapidly exhausting themselves by their constant motor activity, strength may be preserved and the patient tided along until the mental excitement subsides. In depressed conditions where the patients have active suicidal tendencies it is often the only way to save life, since such a patient can and will take his own life if vigilance is relaxed for an instant unless he is secured in some safe restraint.

For the patients who are habitually violent, seclusion in rooms by themselves is often bad, and by judicious use of restraint when their violent tendencies are manifested they can be kept safely among others.

Self-mutilation, habitual and constant masturbation, destructive tendencies, and denudation of the person often call for some form of restraint to protect the patients from inflicting serious injury upon themselves. Old and feeble senile cases who are restless often need some mild form of restraint to prevent them from getting out of bed, falling on the floor, and breaking bones or inflicting serious bruises.

The suicidal and exhausted cases are often restrained in bed by either the so-called bed harness or bed sheets. A bed harness consists of a leather pad to which are attached strong webbing bands, which are fastened to the sides of the bed by strong ties. A waist-belt is secured to the leather pad and buckled about the patient. Shoulder-straps also pass from the leather pad over the shoulders of the patient and are fastened to the waist-belt. Padded anklets attached to the webbing bands secure the feet in position but allow considerable freedom of motion. Before placing the patient in such a harness it is necessary to put on a light camisole, so that the hands may be tied to the side of the bed. Patients are generally comfortable and safe in this restraint, but it is complicated and easily broken and often gets out of repair, so that many institutions prefer a bed sheet.

This is a stout canvas sheet, cut a little larger than a single bed,

made double, and stitched firmly about the edges. Along the sides and ends are placed at intervals of eight to twelve inches strong ties or heavy tapes, by which the sheet may be fastened securely to the rails of the bed. At the top of the sheet a semicircular piece is hollowed in to allow the patient's neck to pass out. To the end of this sheet and stitched in firmly along the front of the neck and body part is a camisole. This camisole is first put on to the patient, laced up, and the arms secured to the side of the bed by ties through the eyelets in the ends of the sleeves. Then the sides, top, and bottom of the sheet are tied securely to the bed-rails by the firm tapes. In this restraint soiled linen may be changed by loosening the lower half of the sheet only. By fastening both arms to one side of the bed a change of position may be secured. This is, of course, a great advantage if patients are restrained long at a time.

A camisole is used generally for violent and destructive patients, or for able-bodied patients whose tendencies are actively suicidal, and yet who do not need bed restraint. It consists of a fitted waist, generally laced in the back, with long sleeves which extend over the hands and are closed at the ends. Eyelets are placed in the ends of the sleeves so that the arms can be crossed and secured by tying behind the back if necessary. This camisole may be made of soft canvas, stout unbleached muslin, drilling, or denim, and should be made double, the seams turned in so there will be no scratching, and firmly stitched, especially around the neck. It should fit well but not tightly.

For destructive patients who tear ordinary clothing princess dresses with closed sleeves, made of stout linen, denim, or soft canvas, are often used. These should be buttoned or laced behind.

All patients who are in restraint require special attention on the part of the nurse. They must be bathed frequently and rubbed daily with alcohol and their backs powdered. The underclothing and bed-linen must be kept perfectly clean, smooth, and dry. If the patient become soiled by feces or urine, he should receive attention immediately and the greatest care should be taken in cleansing and drying the parts thoroughly. The danger of bed-sores is always present, especially in old patients who are confined to bed for long periods at a time. A lotion made of tannic acid dissolved in equal parts of alcohol and water is of great use in preventing the breaking down of the tissues where there is continuous pressure.

For patients who are restrained in bed a frequent change of position is necessary to make them comfortable and prevent pressure sores. The nurse should never lose sight of the fact that restraint is only to be used when needed and by a doctor's advice, and that it should always be made

as comfortable as possible and taken off as soon as consistent with safety.

In the feeding and care of the insane infinite pains, tact, faithfulness, and patience are needed. No nurse should undertake such care with the anticipation of success unless she is willing to give these in full measure. If she does bring such qualities to the work, success is assured, and she will earn the gratitude of patients, friends, and the physician for whom she nurses.

MOUTH-BREATHING—ITS INJURIOUS EFFECTS

By JOHN O. ROE, M.D.

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THERE is no perverted function attended with so many ill effects, and none persisted in so continuously and with as little concern, as that of mouth-breathing. In proof that man was intended to be a nose-breather we might cite the authority of divine writ, when it says, "The Lord breathed into his nostrils the breath of life," which shows that the ancient Jews had a proper conception of the nose as a divinely appointed organ of breathing.

The scientific proof that man was intended to be a nose-breather is deduced not only from the ill-effects resulting from mouth-breathing, but also from the important physiological functions that the nose performs in the animal economy.

The four principal functions performed by the nose are that of smelling; that of filtering or separating from the air we breathe foreign substances; that of imparting moisture to, and that of modifying the temperature of, the respired air.

The sense of smell performs a most important physiological function in protecting us from the poisonous emanations that contaminate the air. Without the sense of smell, the absence of which in our cities might frequently be regarded as desirable, we might unconsciously fail to be warned against unsanitary conditions, such as the escape of illuminating gas in our rooms, coal gas from our furnaces, noxious gases from our sewers, all of which are deadly poisons, as illustrated by the frequent deaths from such causes. Thus when the sense of smell is destroyed by diseased conditions, or the nasal passages are obstructed, we not only

lose the protection which this sense gives us, but we are denied the pleasures of delightful odors as well as the savory flavors of our foods and wines, which contribute much to the happiness of life and thus indirectly to the health of the individual.

The part that the nose performs in straining the air of dust, germs, and other foreign substances is a very important one, for air, containing, as it does, germs in large quantities, is freed from them when it reaches the windpipe, while the front part, the vestibule of the nose, is found swarming with these germs that have been arrested there. The importance of this is further shown by the fact that there is contained in the amount of ordinary air in our densely populated cities inhaled during one hour from fifteen hundred to fourteen thousand germs, and also by the fact that this air after passing through a normal nose and reaching the lungs is entirely freed from these germs. The office of the nose in filtering the air, and thus excluding dust and other foreign substances from the lungs, is consequently of the greatest importance in the prevention of pulmonary diseases.

The imparting of moisture to the air, when too dry for respiration, is also a very important function of the nose. The irritating effect on the throat and lungs of too dry an atmosphere is generally understood, and for this reason various devices are in use for imparting moisture to the furnace-dried atmosphere of our houses. Persons who breathe through the mouth, however, suffer from irritation of the throat and lungs from this cause in a much greater degree than nose-breathers. This is accounted for by the fact that in a dry atmosphere during each twenty-four hours about five thousand grains of water, or over ten ounces, are by the vascular tissues of a normal nose imparted to the air that passes through it on its way to the respiratory organs below. This supply of water given out by the nose is, however, regulated by the vasomotor or sympathetic nerves so as to meet the requirements in different cases, since the supply is varied according to the different degrees of humidity of the atmosphere, and also according to the readiness with which the nasal supply itself is taken up by the air as it passes through the nose.

Moreover, the temperature of the inspired air is modified, so that by the time it reaches the lungs, no matter how extreme the heat or cold of the atmosphere may be, it is brought to a healthful temperature for inhalation. We can, therefore, very readily understand the ill effects that sooner or later must be caused by mouth-breathing, in consequence of which we fail to obtain the benefit of the physiological functions that the nose performs. With the substitution of oral for the normal nasal respiration the air we breathe has no filter with which to free it from

dust and germs, nor is the air modified by having moisture and warmth imparted to it. As a result of mouth-breathing the throat becomes dry and irritable, the larynx irritated, attended with hoarseness and cough; the person is made more susceptible to colds, and a general catarrh of the throat and bronchial tubes and often asthma are caused thereby. Nor does it stop here. The deeper air passages and lungs thus irritated and diseased become an excellent feeding-ground for the consumption germ, and consumption is but the natural and frequent termination of this condition.

Mouth-breathing, therefore, may be regarded as one of the principal predisposing causes of consumption, while nose-breathing is the natural safeguard for its prevention. In children, and in adults too, various spasmodic affections of the larynx are induced by this long-continued irritation. The distressing and often alarming condition of spasmodic croup, or laryngismus stridulus, coming on during the night is almost invariably the result of mouth-breathing. Persons who breathe through the mouth do not experience the delights of "Nature's sweet restorer, balmy sleep."

Few people who breathe habitually through their mouth during the entire night will admit or believe that they do so or that they snore, because they are convinced that they go to sleep with their mouth closed and instinctively close it on waking; but the fact is, nevertheless, verified by the dry throat, parched tongue, bad taste in the mouth, general lassitude, and lack of the refreshed conditions of the nose-breather. There are none, however, that suffer so much from this perverted function as children. The first inspiration of a new-born babe is through the nostrils, and cases are known of infants suffocating because the nostrils were occluded. Mouth-breathing, therefore, is an acquired habit; and man and his boon companion, the dog, who occasionally tries to imitate his master's example, are the only animals that acquire this habit, the injurious effects of which should be more widely known and guarded against.

It is a singular fact that the North American Indians are more alert to prevent this perversion of a normal function than their civilized brethren. Among the earliest tribes of American Indians it was found that nasal respiration was religiously cultivated from the instant of birth, and the Indian mother watching over her infant, no matter whether asleep or awake, invariably closed the infant's mouth, so that Nature's law might become a fixed habit throughout its life.

The disturbing effect of mouth-breathing during sleep is clearly illustrated by the tossing about of the person or the child at night in the effort of Nature to obtain more air, which is always deficient in amount

in mouth-breathing. From this cause alone much anæmia, debility, neurasthenia, and nervous prostration result.

The injurious effects of mouth-breathing are not only emphasized by the conditions already enumerated, but in children its effect is very apparent in their development. From this lack of air and of oxygen the child's growth is impaired. The chest is imperfectly expanded and prevented from obtaining its normal dimensions, and thereby becomes abnormally contracted. The condition termed "pigeon" or "chicken-breasted" results from this cause. The abnormal physiognomy of the child resulting from its continued open mouth is also very pronounced. Not only does the child acquire a vacant, idiotic expression, but the nose and also the central portion of the face fail properly to develop. The nose thereby not only remains small and contracted, but from lack of use, like an abandoned road overgrown with weeds and bushes, the nasal passages become filled in and obstructed. The end of the nose frequently becomes abnormally enlarged and the condition termed "pug nose" results. It is also observed that the development of the brain is markedly interfered with from its dependence upon the development of the central portion of the face.

The influence of this habit on the teeth is also marked, for during development the constantly closed jaws make them assume a regularity which is rarely seen in mouth-breathing children, but which is a feature to be admired in the Indian, who has the most beautiful mouth in the world.

From the lack of development of the nose the arch of the hard palate, or roof of the mouth, also becomes abnormally high, compelling the incisors, or front teeth, to project unduly, a sign altogether too frequently seen of the parents' neglect to properly attend to the conditions necessitating mouth-breathing during infancy and childhood.

Catlin in his observations of the native races of North America attributes their fine physical development quite as much to their habits of nasal respiration as to their outdoor life. He says, "The Indian warrior sleeps and hunts and smiles with his mouth shut, and with seeming reluctance opens it even to eat or to speak." In summing up his observations on this subject he says, "If I were to bequeath to posterity the most important motto which human language can convey it should be in three words, 'Shut your mouth.'" The truth of this motto cannot be too forcibly impressed upon the minds of all.



HOME ECONOMICS

By ALICE P. NORTON

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(Continued from page 24)

VI. THE FUEL FOODS—CARBOHYDRATES

A LUMP of sugar or of starch bears little outward resemblance to the coal that we burn in our stoves or to the wood that gives the cheerful blaze in our fireplaces; yet the sugar and the starch serve much the same purpose as do the wood and coal, and to the wood they bear a close relationship.

The process of oxidation, or burning, is essentially the same whether it be carried on in the stove or in the body. In either case the carbon and hydrogen of the fuel unite with the oxygen of the air to form carbon dioxide and water, and this chemical change produces heat. In one case the union between the elements is so rapid that light also is produced; in the other the combustion is slow; but the total amount of heat is always the same for a given amount of carbon oxidized, whether the combustion be slow or rapid, or whether it take place within the body or without.

Sugar and starch are the most important representatives of the class of fuel foods that we call carbohydrates. The name comes from the fact that these substances are composed of carbon and of the elements of water, hydrogen and oxygen, in the proportion in which they are found in water.

The following classification of the principal carbohydrates will help us to understand and remember them:

STARCH GROUP.	SUCROSE, OR CANE-SUGAR GROUP.	GLUCOSE GROUP.
$(C_6H_{10}O_5)_n$	$C_{12}H_{22}O_{11}$	$C_6H_{12}O_6$
Starch,	Cane sugar, or sucrose;	Grape sugar, or dextrose;
Dextrin,	Milk sugar, or lactose;	Fruit sugar, or levulose.
Cellulose,	Malt sugar, or maltose.	
Glycogen,		
Gums.		

Starch is wholly a vegetable product, and is built up by green plants from the carbon dioxide of the air and from water. It is found in the cells of plants in the form of small grains varying much in size and appearance. So characteristic is the appearance of the starch from different sources that the grains are readily identified under the microscope.

Starch-grains from the potato show a series of concentric markings, and look almost like tiny clam-shells; corn-starch is angular in form, and many of the grains show a distinct cross upon them; wheat-starch presents a great variety in size, but the form is generally oval.

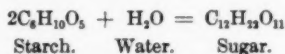
If cooked starch be held in the mouth for a few minutes or chewed it becomes distinctly sweet in taste, owing to the fact that the saliva has the power of changing it into sugar. Starch may also be changed into sugar by certain ferments, like diastase, which cause the malting of the grain in the first process of beer-making, and by the action of acids with heat. An illustration of this action is sometimes observed in cooking when lemon-juice or vinegar has been combined with corn-starch or flour and water and heated. If the cooking be prolonged, the thick mixture often suddenly liquefies from the change of the starch into sugar.

Dextrin is an intermediate product whenever this change takes place. Its formation is one of the first steps in the process of starch digestion. The "predigestion" of certain patent cereal foods consists of the more or less complete change of the starch of the cereal into dextrin and sugar. The simplest way to distinguish dextrin from starch is by the iodine test. A drop of iodine solution added to starch gives a blue color, while with dextrin it gives a red about the shade of port wine.

Glycogen is the form in which carbohydrate is stored in the liver for the use of the body. It is given off to the blood in the form of sugar as it is needed for use.

The gums of the starch group are numerous. Perhaps pectose, the substance that makes fruit jelly "jell," is as important as any from the food standpoint.

The cane-sugar group bears a definite chemical relation to the starch group, which may be roughly expressed by the formula



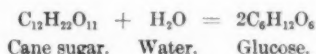
With cane-sugar we are all familiar in the ordinary commercial sugar, the product chiefly of the sugar-cane and of the beet-root. Contrary to the popular impression, the finished product from these two sources is identical. The sugar of the maple is also cane-sugar.

Lactose, the sugar of milk, though having the same composition as sucrose, or cane-sugar, has different chemical properties. It is supposed to be the most digestible of the sugars.

With maltose we are most familiar in malt, a product of the fermentation of the starch in barley or other grains. Maltose is also one of the sugars formed in the process of starch digestion and as a result of the first chemical changes in the making of yeast bread.

The glucose group of sugars is represented chiefly by two substances whose names mean the right-handed and left-handed sugars, because, though these sugars are otherwise identical in composition, when a ray of polarized light is passed through their water solutions dextrose rotates the ray to the right and lævulose to the left. Grape-sugar is found abundantly in the grape, and is the sugar so often found in crystals in raisins. Fruit-sugar, as its name implies, is abundant in most fruits. Glucose is used somewhat loosely to mean either grape-sugar, or a mixture of grape- and fruit-sugar. Commercial glucose is obtained from starch by treating it with acids.

Cane-sugar may also be changed into a mixture of dextrose and lævulose by the action of acids in the presence of moisture and heat, and is then called invert sugar. When in making candy we add vinegar or cream of tartar to prevent the candy from crystallizing we are inverting a portion of the cane-sugar, or changing it to a glucose sugar. We might express the change in this way:



(To be continued.)

SOME COMMON POINTS OF WEAKNESS IN HOSPITAL CONSTRUCTION *

By ANNIE W. GOODRICH

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IF it be true that, despite the most careful revision of plans by Directing Boards, Medical Boards, and officials, a building is rarely erected that does not immediately upon occupancy show most incomprehensibly glaring defects, and that limited funds not infrequently necessitate arrangements which it is perfectly understood will have to be replaced in the near future at double the cost, it is also true that many of our recent buildings, richly endowed or otherwise, present to the critical eye of the practical worker a similarity of defects which would be avoidable without an increase of the initial expense, and an elimination of which would greatly facilitate the economical running of the most expensive plants which the public are called upon to maintain. Time and the immensity of the subject forbid an attempt to compare the

* Read at the tenth annual meeting of the American Society of Superintendents of Training-Schools for Nurses, Pittsburg, October 7, 8, 9, 1903.

advantages and disadvantages of the different arrangements of even those hospitals which we have been able to inspect, interesting as such a discussion would be. Neither do I propose to more than touch upon the major essentials, site, architecture, etc.

As continual growth is the history of every successful hospital, forms of architecture which will not lend themselves to extension without excessive cost would seem to us defective. As the most perfectly constructed plant would be one that with the smallest possible force would minister most effectively to the needs of the patient, so exteriors which do not allow of balconies or roof gardens, pavilions not connecting except by stairs or uncovered alleys, with long intervening corridors, and kitchens and laundries not communicating with other departments by dumb waiters or elevators, are certainly open to criticism.

Concerning ventilation and plumbing we have little to offer, but we would call attention in passing to a few points.

A plan of ventilation much in vogue is the throwing in of fresh hot air from above by fans, the outlet for impure air being from below; but a deposit of soot from the ceiling downward, and a draught necessitating a screen around each bed, makes one doubt the perfection of this system. Neither have we ever seen it prove an adequate means of heating, unless with the assistance of steam.

The necessity for the laying of steam-pipes and of having all pipes easily accessible would hardly seem to require mention. But in view of the fact that in a very recent building a very large number of pipes would have been enclosed in plaster but for the timely interference of an official not actively engaged in hospital work, and that in another hospital steam-pipes had not been carried even to the operating-room, it is proper to indicate the occurrence of such errors.

Windows placed at such a height that a patient sitting, or lying in bed, is unable to see out is an unnecessary deprivation to them of what would be a great source of diversion. As a prevention of accidents or suicides high windows are useless. Ornamental but secure gratings would not only serve the purpose far better, but are absolutely necessary in every window, high or low.

A satisfactory flooring that is inexpensive has yet to be found. Terazzo, which cracks; cement and similar forms of flooring, which are ugly and always unclean in appearance; cheaper woods, which hardly seem sanitary and have a tendency to warp and stain, are the floors most frequently used. Speaking from the standpoint of practical experience, we firmly believe that tiling, marble, mosaic, or the very expensive wooden floors, great as is the initial cost, are sufficiently satisfactory and durable to be really economical in the end.

Methods of lighting and of cleansing operating-rooms are to our minds still unsolved problems. In some hospitals abroad, we understand that after every operation, or at the end of each day, the rooms are closed and subjected to live steam. This would seem to be a thorough way of treating rooms used for septic cases. Too many of our operating-rooms do not even boast of a drain which will allow of their being flushed with water or disinfectants. Proper and convenient adjacent rooms for the attending staff, house staff, the preparation of dressings, and closets for supplies, are the exception, not the rule.

Wards in which the accessory departments, such as dining-rooms, lavatories, and pantries, are not immediately adjacent on account of intervening halls, or that are limited in size, or where rooms for convalescent patients, steam disinfecting, and drying closets are omitted, are poorly planned. But the greatest general defect is the inadequate apparatus for the cleansing and disinfecting of ward utensils and linen.

As an illustration let us speak of typhoid. A query as to the theory taught in our training-schools concerning the disinfection of all articles used in connection with typhoid patients elicits a reply which scarcely varies by a word. An answer to the query as to the carrying out of such theory would scarcely differ but for a not unnatural dislike to acknowledge how inadequate are the means. A typhoid is only one, and perhaps the least objectionable, of the communicable diseases which are to be found in our general wards, we cannot advocate too strongly methods which will perfectly protect the patients who are under our care. Elaborate bathtubs, closets, and washstands are always found, while slop-sinks are frequently and disinfecting tanks almost invariably omitted.

The disinfectant which was satisfactory yesterday is useless to-day, but on the efficacy of sterilization we believe all authorities are agreed. Therefore, in our lavatories, a very simple and a very possible way, and also a method which would be an economy in both time and material, would be to carry live-steam pipes into our disinfecting tanks, so that all utensils used in connection with the patient could be sterilized, as personally we believe they should be whenever used. As blood-stains and excreta are not indelible if not allowed to dry before boiling, the advantage of the immediate sterilization of the linen would be twofold: the removal of all source of danger and the prevention of discoloration.

I do not recall ever having seen a satisfactory arrangement for storing and preparing the ice for external use. Certainly the dining-room or pantry table is not the place to refill an ice-cap that has just been removed from the patient.

Another not unimportant oversight, when so many conditions are treated by baths, is the failure to arrange for emptying and filling por-

table tubs. A convenient and cleanly arrangement is a marble slab in the floor of the lavatory or some adjoining room with a depression in the centre converging towards the drain and faucets sufficiently high to allow of tubs being placed under them.

How rarely are closets for patients' clothing built in close proximity to the wards, with proper means for ventilation and sufficiently large not to ruin the patients' clothing. Almost invariably these closets are small, are sometimes placed in the basement, and not infrequently even are omitted.

While a few recently built hospitals have arranged for a dining-room and pantry in connection with each ward, very many still omit the former and set aside a space for the latter which is much too small to allow of proper china closets, steam-tables, refrigerator, and sink. We think too it is equally as necessary for the sake of perfect cleanliness that here again arrangement should be made for the boiling of all utensils. It would certainly do away with the necessity of isolating certain patients' dishes, a precaution which we often feel upon thorough inspection to be of little real value.

The sins of omission in the children's department are numerous. A hospital that pretends to care for children, and then provides neither sun-parlor, roof-garden, nor recreation-room, or that desires a good service and then fails to provide observation-wards and temporary isolation-rooms to prevent the continual closing of the general wards because of contagion, is at least short-sighted. But the omission to provide a room where the surgical cases can be treated individually is almost inhumane, and would never be repeated by those responsible for the omission if they could once see the almost frenzied condition to which the little sufferers awaiting their turn are reduced by the screams of the child under treatment.

The advantage of arrangements in the basement, or at least outside the ward, for the removal of clothing and bathing of patients on admission are too obvious for their omission to be excusable. Yet absent they are. We again call attention to the disposition to omit all sinks and other apparatus for cleansing and disinfecting, which are even more necessary here than in the wards.

A private patients' building in connection with any other department, such as the rooms for the staff or Nurses' Home, is a great and unfortunately frequent mistake. The most common cause of complaint on the part of the patient is that of excessive noise. Elevators should be noiseless, but they are always noisy. Halls should be kept as quiet as possible, but the omission of reception-rooms for friends of the patients, working departments for the nurses, and, above all, a room for the special

nurses on duty who are obliged to absent themselves temporarily from the patients' rooms, make them centres of much disturbance.

The advantage of lavatories for working purposes being separate from those for the use of the patients is quite obvious, but such an arrangement is rarely found. They should be placed in as inconspicuous positions as possible, but yet are not infrequently found in close proximity or directly opposite to the reception-rooms or elevator.

An important factor in the economy of labor is the placing of as many rooms on each floor as possible. A recent comparison of a certain number of rooms on one floor of one hospital with the same number of rooms on three different floors of another showed the necessity of trebling the nursing force in the latter case.

Such perfect plans for isolation wards have been conceived and carried out that a building excellently arranged for the isolation of two or more diseases, yet providing only one dining-room and pantry for all, seems inconceivable. We could, however, mention three hospitals in which this has occurred. Stress should be laid on the importance of having each ward and its accessory departments absolutely separate, with intervening passages and double doors and apparatus for steam disinfection on the premises. The diet kitchens have done such good work that their presence is generally assured, but the economical advantage of their being connected with the main kitchen is perhaps not always appreciated.

We could go on indefinitely mentioning and enlarging upon defects, but in view of the fact that long and able articles on all the different points of construction have apparently failed to prevent these defects we do not believe that pages of suggestions and volumes of plans would alone solve the problem. We do believe, and this article will have failed of its main object if we cannot induce you to believe with us, that wherever the responsibility may have lain in the past, we will have to assume a large share of it now. It is ours by right of experience. Starting from the lowest rung of the ladder, our hands have touched every department. We know, or should know, better than anyone else the needs of the patient from the standpoint of every condition and the standpoint of every class.

In the vast amount of matter with which the architect has to deal, details which to us are so important are to him of minor consideration. More than once when we have asked how such mistakes could have been made the answer has been, "Our opinion was never asked; we scarcely knew a building was in progress." We do not think the busiest superintendent should ever make this excuse. Hospitals did not call for training-schools; States are not calling for legislation. Our Patron Saint has

set us an example. In notes from a lecture on hospital construction given before the British Medical Association in 1869 by Douglas Galton, F.R.S., it is interesting to read that "amongst the publications on the subject, Miss Nightingale's 'Notes on Hospitals,' etc., may be mentioned as having contributed largely to the spread of sound principles of hospital construction in this and other countries." Our fight for recognition is a moral obligation. Of how much value to our nurses are our excellent theories if we do not see to it that proper means are provided for their execution?

From the moment that the idea of a new hospital is conceived or that extensive alterations are talked of, from that moment the superintendent of the training-school should commence to acquaint herself with every detail upon which she could possibly be called for advice. However great the demand upon her time may be, she must be awake to the fact that the best basis for her work will be the well-planned institution. Let her insist upon seeing the plans and upon getting in touch with those members of the board who are most directly interested in the building in the course of erection. She should visit as many institutions as possible with a view to widening her horizon.

Superintendents of training-schools are not architects, but as a condition of their being in the positions at all, good executives they must be, and as such they should use all available material to the best advantage. On every staff and in every training-school are men and women who are ingenious in just those details which would be important in certain points of construction. Let the training-school superintendent consult with them. Plans take weeks; construction takes months. She will have time, therefore, to anticipate the work of the architect and to follow step by step the course of construction.

Our predecessors fought for the establishment of the training-schools with not less of opposition than must be met by every new and untried scheme. If, in battling for legislation and establishing superintendents' courses and preliminary courses, we of to-day have been so busy that we have overlooked the tremendously important part the institution plays in the education of the nurses, or if in using the institution for the individual, we have failed to use the individual for the institution, we can but hope that our successors entering the field, equipped as we only wish we might have been, will be able to obtain recognition as authorities in hospital construction. Personally we have seen such a disposition on the part of the men and women interested in our institutions to listen to practical suggestions for their improvement, in their anxiety to have them minister perfectly to the needs of the sick while serving as educational centres, that we think their battle will be easy and that their victory is assured.

The difficulty of obtaining any compiled information on hospital construction suggests the value of a book containing the plans of the different hospitals in this country. Would it be possible for every member of this association to obtain the plans of the institution with which she is connected and to make notes on those arrangements which are particularly satisfactory or defective? A volume compiled in this manner would be of value, not only in the planning of new institutions, but as a reference-book for the different schools that are giving instruction on the subject in their preliminary courses.

THE DUTY OF THIS SOCIETY IN PUBLIC WORK *

By L. L. DOCK

A LONG paper on this subject is, naturally, not to be expected, but a few suggestions arising from the intimate following of the society's affairs during a period of seven-years' secretaryship may, perhaps, be useful, especially to those members who, from the compulsory absorption of their own urgently pressing duties, have not given special time or attention to the question of the character and efficiency of the society as a whole.

The question which instantly arises when one considers the society as an organization, and which arises constantly before the vision of those who conduct its affairs, is, "How to make the society more effective." If we compare in a historically impersonal manner the objects of the society, the women of whom it is composed, the training-schools which it represents, and the enormous *latent* power and influence which it possesses in these members, with the actual influence exerted and made manifest, we must confess that the society is not effective—at least, vastly less effective than might be expected of it. True, it has done some *sporadic* pieces of good work: it has planted and cultivated the Associated Alumnae, established the Teachers' Course, and assists in various good enterprises as they come along, such as congresses, etc. But to what extent is the society an influence? To what extent does it affect the public? How much does it actually guide nursing education? What weight has it with hospital managers and staffs? What amount of force does it bring to bear on its own members in questions of education, ethics, etc.?

* Read at the tenth annual meeting of the American Society of Superintendents of Training-Schools for Nurses, held in Pittsburg, Pa., October 7, 8, 9, 1903.

An honest searching after true answers to all these questions will inevitably bring the admission that the society, in all these rather abstract but most important ways, has not done what it might do; has not made itself a moral force; is not a public conscience; takes no position on large public questions; is not feared by those of low standards; allows all manner of new conditions and developments in nursing affairs to arise, flourish, succeed, or fail without taking any notice whatever of them, apparently not even knowing about them. I am speaking—let me repeat—of the society as a body, not of individual members. Yet this society, as one body, would often be astonished at the actual extent and weight of its influence if its whole latent and at present unsuspected power were actually to be systematically exerted in an intelligent and energetic manner.

In the past no committee on current events—as one might call it—has ever existed, and the secretary has never been empowered to speak for the society, as it were, on public questions; yet several occasions have arisen in which your ex-secretary did upon her own responsibility undertake to speak for the society, the matters being such that she felt certain of the society's position, and the tone of the replies strikingly demonstrated the fact that the society possesses a latent strength which it does not wield often enough.

The present secretary can mention one or two instances which will illustrate. A practical suggestion seems to be that a small standing committee, carefully chosen, might be authorized to watch public events as related to nursing and to make the voice of the society constantly heard, whether in criticism, in commendation, in warning, or in petition. Many important developments are looming up. A complete revolution in methods of teaching nurses seems to be imminent. A quite determined movement on the part of certain elements of our masculine brothers to seize the helm and guide the new teaching is also most undeniably in progress. Several of these same brothers have lately openly asserted themselves in printed articles as the founders and leaders of that nursing education which, so far as it has gone, we all know to have been worked out by the brains, bodies, and souls of the women to whom this paper is addressed, and who have often had to win their points in clinched opposition to the will of these same brothers, and solely by dint of their own personal prestige as women.

The different State laws now in progress all vitally affect the nursing education of the future. This society ought beyond a doubt to make itself heard on all principles involving points arising in these legislative acts. It has also for some time been a vexed question in the mind of your ex-secretary whether glaring professional injustice and indignities

suffered by its members at the hands of political jobbers or overbearing medical or lay managers should be allowed to pass in silence, or whether the society should not, to some extent at least, resent or take cognizance of such incidents and exert some slight degree of protection of its members.

There is also the very delicate question of ethics as to one another which has been suggested to the writer by more than one active member, and that is how far a member of the society may feel justified in following another in a position where some question of principle was involved without first making it clear that the principle must be upheld?

These and other points I commend to the society in the hope that it may truly become an effective public force.

THE WORLD'S WAR AGAINST CONSUMPTION

(Continued from page 31)

STAMPING OUT TUBERCULOSIS IN NEW YORK CITY

BY GRACE FORMAN

Graduate of New York City Training-School.

NEW YORK CITY, or, rather, Manhattan and the Bronx, are divided by the Charity Organization Society into eleven districts, and from each district such tales of woe and misery resulting from tuberculosis poured into the central office that it was decided to inquire deeply into its causes and prevention. A Committee on the Prevention of Tuberculosis was formed, and our statistician has shown us that in New York thirty thousand die of tuberculosis annually.

Medical research has proved by autopsies that most people have had tuberculosis of some part of the body at some time of life, but have been cured of that to die of something totally different.

After visiting fifty cases in the different districts, I felt convinced that in thirty-eight of these deficient nourishment was the predisposing cause.

But theories count for nothing with the Charity Organization Society, and everything must be proved. They asked if I thought that I could prove that statement. I thought that I could, and took one case to experiment upon.

She was a bright, ambitious, neat woman with two children, and had been deserted by a worthless husband. She lived in an attic room

with two dormer windows, one overlooking the street and the other an adjoining roof, so that the light and ventilation were good.

The physician consulted said that she had reached the second stage of pulmonary tuberculosis and was going down very rapidly.

She could not sit straight, but stooped at the shoulders badly. Her head was always held to the right side and that shoulder elevated, "to help to breathe and to relieve the pain." She could not walk half a block without stopping "to get breath."

She was relieved of the care and anxiety of her children, and I was given *carte blanche* to the amount of one dollar per day.

I gave her a very generous bill of fare to follow, but had trouble in persuading her that she was not extravagant in using milk and butter and the best of meat and vegetables, and she was greatly surprised to find fruit so liberally prescribed. She did her own cooking, kept a record of everything which she ate or drank, took long trolley-rides in open cars, and in nine days gained five and one-half pounds. In three weeks she returned to her work of olive-packing with a happy look replacing the worried and anxious expression, erect carriage, breathed deeply, and was able to walk several blocks without fatigue.

She earns from six to eight dollars per week, continues to take extra milk and eggs, and has learned the economy of good, nourishing food, and avoids the dangers of the teapot and frying-pan.

One young girl who has had twenty-one hemorrhages has been sent out in the country, where she takes nine eggs daily besides her regular diet and is building up and gaining in weight.

Of course, these patients are among the very poor, and cannot obtain the amount and quality of milk and eggs which the physicians wish them to have, and the Charity Organization Society obtains these for them with remarkably good results in most cases.

The three favorite prescriptions are food, air, and rest in proper doses. Very careful instruction is given each one respecting the sputum, and covered tincups with paper boxes inside are supplied to each patient. The paper boxes are burned daily or oftener, and paper napkins and pocket linings are supplied to those able to go about. Where the wage earners are ill, the rents have been paid and the families supported. The patient is given the room admitting most light and air and a bed alone if possible.

Most of these patients do better in their own homes, if properly looked after and instructed, than in the hospitals now open to them, and when their personal cleanliness is made the condition of their remaining at home it has often had a most salutary effect upon the entire household. If sent to a hospital for consumptives, they are apt to return

and tell you, "That was no place for me, for everyone up there had consumption but me." Others who realize and acknowledge their condition beg to be allowed to die at home. One brave little woman who had been the main support of the family begged her mother to forgive her for dying, assuring her that she had tried her best to live.

The Italians are particularly susceptible to tuberculosis. Leaving their pastoral lives for the overcrowded tenements so completely demoralizes them that they fall an easy prey to this cat-like disease, which often plays so long with its victims, and from which they so rarely escape if once caught. As their cheeks grow thinner, and their beautiful, dark eyes grow larger and brighter, you feel that the mute appeal of their helplessness when all human aids fail must reach to heaven, and that a remedy must soon be sent for this "great white plague."

Italians are so clannish and affectionate that we find eight or nine occupying two rooms, and we are rendered rather helpless when trying to show them that they are endangering their loved ones if we come up against their religion. Like a stone wall they reply: "I believe not one man make another sick. My God only send sickness. My child love God, God love my child—not make him sick." They are, however, susceptible to kindness, and will do for the loaves and fishes what nothing else will persuade them to do. You can separate them by paying their rent, supplying coal, food, clothes, etc., and so prevent a congestion of more than the lungs.

I do not feel that I have covered all the points that nurses need to know in undertaking this work, but the more it is studied the broader and deeper become the questions. The disinfecting and housing problems are most puzzling, but will be partly solved by tubercular dispensaries and sanatoria, probably, if we have patience and perseverance in this much needed work.

Case I.—September 24, 1902. Severe cold and cough lasting six weeks, following two years of very hard work and trouble, combined with the care and support of two children. Children cared for and extra diet supplied.

September 25....weight 114 pounds	October 19.....weight 123 pounds
October 4.....weight 119½ pounds	October 25.....weight 122 pounds
October 12.....weight 122 pounds	November 5.....weight 126 pounds
October 15, returned to work.	February 15.....weight 136 pounds

Case II.—Waiter. Was put under medical care and given extra diet, beginning with six eggs daily and two quarts of milk, which he has successfully increased to seventeen eggs daily and three quarts of milk, producing a gain in weight of six and a half pounds in three weeks. He is not yet allowed to use his arms in any work.

Case III.—A widow whose husband died of phthisis. Has a tumor and pulmonary tuberculosis. She is janitress in a large apartment-house and has one little girl to support. She was supplied with milk, eggs, and cod-liver oil. From December 15 to January 15 she shovelled thirteen tons of coal and gained three pounds during that time. The tumor has not increased in size, but she is considered too frail to be subjected to an operation.

WORK OF THE JOHNS HOPKINS ALUMNÆ

THE Johns Hopkins Alumnæ has taken keen interest in the warfare against tuberculosis, identifying itself when possible with any movements in that direction which have taken place in Baltimore. Our nurses were active members of a committee formed to collect money for the purpose of building a sanatorium for consumptives in the mountains near, and a good sum for this object was contributed by the nurses.

In one of the early numbers of the *Alumnæ Journal* Miss Barnard made a strong appeal to the members to bestir themselves, and to use their energies in some definite way to help on in this great warfare. Since then almost every number has had an article on the subject by some one of our members.

Interest in the nursing care of tuberculous patients led Miss Agnes Kernan, a graduate of the Class of 1901, to the Trudeau Sanitarium in the Adirondacks, where she remained at work for the better part of a year.

A similar interest has led Miss Sheba Milin, a graduate of this year's class, to offer to devote herself wholly to work among tuberculous patients in the city of Baltimore if suitable arrangements can be made. It is hoped that she may be able to carry out a plan of house-to-house visitation, providing proper care for the patients and teaching them and those about them how to prevent the spread of infection, securing careful disinfection of premises, and generally forwarding all known and available measures for the prevention of the disease.

M. A. NUTTING.

WORK OF THE VISITING NURSE ASSOCIATION, CHICAGO

IN January, 1903, the directors of the Visiting Nurse Association of Chicago appointed a committee from among their number to arrange for a meeting of physicians, charity workers, nurses, and others to con-

sider ways and means of organizing systematic work for the prevention of tuberculosis.

The meeting was called on January 26, and was well attended; and a committee on organization was appointed and called the Committee on Prevention of Tuberculosis of the Visiting Nurse Association.

At the February meeting of the directors of the Visiting Nurse Association it was decided to appropriate two thousand dollars for the preliminary work of this committee. An Advisory Committee was formed, composed of about thirty prominent citizens who are interested in this work and desirous of increasing its scope and usefulness. An office connecting with the offices of the Visiting Nurse Association has been rented, and a doctor is in attendance every afternoon to see any patients sent him by the Visiting Nurses, charity workers, and others.

Temporary branch offices are arranged for in each of the eight district offices of the Bureau of Charities with a doctor in attendance. Instructions have been compiled for the use of Visiting Nurses and others for the care of tuberculous patients. Cards of record of "history" of each patient and all necessary details concerning them have been distributed to all the Visiting Nurses and district offices.

As soon as possible the committee intends to open district offices of its own, where more systematic work can be carried on.

The central office is to be in a sense a clearing house for all the district offices, with the doctor in charge, where the history card of every patient will be filed away, and where charts of the city arranged to show the districts where tuberculosis is most prevalent, and with sanitary conditions indicated, can be found—in fact, where every data relating to the work of the prevention of tuberculosis in Europe and this country can be found.

Arrangements are being made for a number of lectures to be delivered during the coming winter in halls, settlements, and public schools on hygiene and other questions pertaining to the prevention of tuberculosis. As soon as is practicable in the autumn a meeting of the Advisory Committee and others is to be called to consider ways and means for the enlargement and further progress of the work.

The question of more sanitary housing of the tuberculosis patients in the city, more healthful occupations for those with tuberculous tendencies, as well as health farms and sanatoria both for adults and children, will be discussed and plans of work arranged.

L. P. HOUGHTELING,

Chairman of Committee on the Prevention of Tuberculosis.

**AID GIVEN BY THE PRESBYTERIAN NURSES' ALUMNÆ,
NEW YORK**

IN modern days the old adage, "An ounce of prevention is worth a pound of cure," has become the radical principle of all philanthropic work. We have passed the stage of giving as a charity, and now, when we try to help our weaker, needier fellow-man, we study first to find the cause of his incompetence and remove that so far as in us lies. Frequently the inability to provide a livelihood for one's self and those under one's care is due to ill-health.

One of the saddest things in work among the poor is the prevalence of incurable hereditary disease. We see so many families with the fatal tubercular taint running through them, growing and spreading under unsanitary conditions, until death sets its seal upon them one by one.

Our contemporaries who have given their lives to the study of this dread disease, its prevention, cure, and treatment, agree that proper hygiene and good, nourishing food mean more in arresting its progress and exterminating it than almost anything else. This, of course, is true of most diseases, but not in the same measure.

The hospitals of the city are constantly lamenting the fact that patients with a tuberculous tendency must be sent back to their poor food and unhealthy environment just when the work of recuperation from an initial attack and the fight against the ever-advancing disease has been begun. This means that to a great extent their work is undone. The evils under which the "other half" live quickly put them farther back than they have progressed.

In view of these facts Miss Savage, a Presbyterian graduate, under the auspices of Dr. James and the Vanderbilt Clinic, has been visiting among such discharged patients, studying deeper into their needs, and at the same time teaching them how, even with means seemingly so inadequate, they may fight disease by observing simple rules of ventilation and cleanliness. Another efficient worker is trying to show them what the body requires as food and how it should be cooked. With such earnest exponents of noble effort along this line a wonderful start has really been made, and to us falls the duty and privilege of giving our aid and support. The Alumnae Association has already appropriated one hundred dollars for buying milk, eggs, etc., for the propagation of this work during the coming year, and satisfactory arrangements have been made with grocers and butchers in these neighborhoods whereby suitable food may be supplied.

(To be continued.)

HYGIENE OF THE HOUSEHOLD

By EVELEEN HARRISON

Graduate Post-Graduate Hospital, New York

(Continued from page 22)

"Forenoon and afternoon and night,
Forenoon and afternoon and night,
Forenoon and—what!
The empty song repeats itself. No more?
Yea, that is Life: make this forenoon sublime,
This afternoon a psalm, this night a prayer,
And time is conquered and thy crown is won."

E. R. SILL.

SUMMER has left us, the day of dreams is past, and woman's world is alive with preparations for winter.

The *dolce far niente* of the past three months is put aside with a resolute hand, and the busy woman, who has dreamed away the summer days in blissful unconsciousness of household cares, wakes up these cool, crisp mornings with a thousand and one plans surging through her brain.

Up and doing is the watchword, but before the doing let us take a brief glance at the best way our "home-maker" may fit herself for the winter's work.

There is always one central figure in every home,—the queen bee, without whom the hive would be a sorry failure,—our "home-maker or home-mother," the one who ought to be considered first, not last, in the household. Most mothers will put this suggestion aside with a smile, as they have put themselves aside for years; but consider for a moment. Here you are, ready for the winter's campaign, cheery, healthy, full of hope and ambition. Why? Because you have taken a little care of yourself the last three months, have rested daily, entered into the amusements of the family, read interesting books, and perhaps taken a trip to nature's pleasure palace; and behold! the world has become new, energy is once more a part of your being, and the winter's work and the winter's worry a thing of nought.

Now I maintain that, with a little forethought, every "home-mother" may keep at least some part of this buoyancy throughout the year, and what a wonderful difference it would make in the home life!

But how may we attain this end? First comes the thought that a woman must be in good condition physically—as the physical part of our being has a tremendous influence over our higher selves—if she would do her work in the very best way. Every illness we have, from a nervous

headache to a severe disease, takes away somewhat of our remaining health and youth, and each time our vitality is taxed a little more to recover its tone. So, if we value our health, let us prevent, or—as the old translation has it—“go before,” in the matter of caring for our bodies, and not permitting them to be receptacles for disease.

In looking back at the history of our Dutch ancestors, when “*they* were the people” in New York, one cannot help but remark the wonderful health and strength of the men and women, the vast amount of work they accomplished, and the small need they had for doctors, nurses, or medicines throughout their long lives. And side by side with these facts comes the history of their daily life, lived in great simplicity, with plain, wholesome food, plenty of fresh air, immaculate cleanliness in person and home, at least eight hours sleep nightly, and some time always provided for improving the mind.

It is all very well for the mother of the family in these busy days to think that it matters not how little she sleeps, or what time she devotes to eating, dressing, rest, or recreation, as long as the children are well cared for and the domestic economy runs smoothly: even should she be too unselfish to care about her own well-being, she must realize that no machine—least of all the human machine—will do its work well if all the parts are not kept in perfect order.

In a large majority of cases where women break down with nervous prostration, nervous exhaustion, nervous dyspepsia, etc., the foundation of trouble is laid by the want of plain common-sense in the arrangements of their daily life.

Eight hours out of the twenty-four is the smallest allowance the busy mother ought to devote to sleep. If it be necessary to be up at six o'clock, make it a rule, when possible, to be in bed (not going up to get ready for bed) at ten o'clock. Even with all the volumes that have been written on the value of fresh air, few people seem to realize what it means to have thorough ventilation in their bedrooms. Because they have always slept with the windows closed, and are so tired when night comes that they would sleep under any circumstances, they shut their eyes to the greater good to be derived by plenty of fresh air in the room winter and summer.

It is hardly too much to say that sleep without fresh air is of very little lasting good to the system. Steam heat should always be turned off at night in the bedroom, and single beds provided when possible for the different members of the family. When ready for sleep, resolutely put aside all household cares and worries, relax the whole body, beginning with the jaw, which is generally held tightly closed, and it will not be long before sleep gathers you in its arms of oblivion and rest.

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ECZEMA CAP AND MASK—FRONT VIEW



ECZEMA CAP—SIDE VIEW

Don Quixote had a deep sense of the blessing of sleep when he said:

"May blessings rest on him that first invented this same sleep. It covers a man all over, thoughts and all, like a cloak. It is meat for the hungry, drink for the thirsty, heat for the cold, and cold for the hot. It is the current coin that purchases all the pleasures of this world cheap, and the balance that sets the king and the shepherd, the fool and the wise man, even."

Next in order comes the care of the person. No matter how limited the time for dressing, we cannot afford to dispense with a sponge-bath (ten minutes will suffice), and another five minutes devoted to a few simple physical exercises, with half a dozen deep breaths—holding the breath while you count ten—thrown in, will dispel that tired feeling the majority of "grown ups" experience on awakening in the morning, besides invigorating one for the day's work. Hair neatly arranged, and a simple house dress put on with care, give every woman a feeling of self-respect that diffuses itself throughout the household and is a pattern even to the maid-of-all-work, for should the mother of the family appear at the breakfast table in a shabby dressing-gown and (shall we whisper it) curl-papers, the whole house feels more or less demoralized.

(To be continued.)

ECZEMA CAP AND MASK

By JESSIE McCALLUM

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A PRACTICAL and simple method of keeping in place a head-dressing is one which has been in use for some time in the babies' wards of the New York Post-Graduate Hospital. It is particularly useful for application over a dressing which must be frequently changed, being much more quickly applied than a bandage, and has also been found to answer well in cases of pediculosis. It is, however, especially adapted to cases of eczema of the face or scalp in children.

It is made of one piece of gauze, full width, and about twenty-four inches in length, one selva-edge being folded over the other about two inches, and is applied so as to envelope the entire head, forward as far as the face, the two ends of the under selva-edge being tied under the chin, while the other two are carried around the neck and fastened behind.

In this way the folds of the gauze, which form the back of the cap, are secured.

In case of eczema of the face a mask of gauze is made, openings being cut for the eyes, nose, and mouth. This mask is firmly held in place by the cap, put on as above.

To successfully manage an eczema case in a child it is necessary to restrain the hands. Formerly a binder, neatly pinned in place, was used; but a satisfactory substitute has been found in the application of carefully padded splints, so arranged that the little patient cannot bend the elbow, all possibility of reaching the face or head being thus avoided. It also has the great advantage of liberating the hands and giving the patient sufficient freedom to handle playthings, etc.

Celluloid sleeves, adjusted with strapping across the back and waist, have also been used with considerable satisfaction, and when these cannot be obtained they can easily be improvised from stiff card-board.



NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELIZABETH ROBINSON SCOVIL



THE APPLICATION OF SERUMS TO THE LIMITING OF DISEASES.—An interesting editorial in the *Medical Record* on this subject says in part:

"If the dreams of such men as Ehrlich, Brieger, Marmorek, Dunbar, Wright, and others take tangible shape, if what may to-day seem to us the too-vague flights of their imaginations can be crystallized or conglomerated into practical therapeutic entities, there will be a profounder medical revolution in the coming century than was even dreamed of by the great captains and masters of the past.

"In a lecture on 'Therapeutic Inoculations of Bacterial Vaccines,' published in a recent issue of the *British Medical Journal*, A. E. Wright says: 'The method which I propose to consider to-day is as yet almost unexploited. None the less does it seem to me to be one destined to revolutionize our ordinary practice in dealing with localized bacterial invasions. Our treatment in the past has consisted in making repeated applications of antiseptics, or, if impractical, extirpating the seat of infection. The time will come when, before embarking on either of these methods of treatment, an endeavor will be made in every case to arrest the invasion and to prevent its recurrence by calling into action the forces of resistance which lie latent in the organism. The physician of the future will, I foresee, take upon himself the role of an immunizer.'

"The declaration of such a creed in the leading article of the *British Medical Journal* is in itself enough to make one pause, only to realize an utter inability to grasp what a practical verification of these concepts may mean. For humanity, such a step in advance would inaugurate a blessed passing of fully ninety-five per cent. of all bodily ills and pains. Death in childhood, in adolescence, in adult life, would occur only as the rarest exception.

"For the medical and for the kindred professions which cluster about it, it would mean dissolution. One man with a case of phials from the municipal laboratory could minister to the great town which to-day absorbs the life energies of a score of physicians. The practitioners of medicine, the imposing drug stores, as well as the mighty corporations which manufacture pharmaceutical preparations—all would pass away.

"What justification, if any, exists for believing us to be upon the threshold of such a medical upheaval—such a therapeutic revolution?

"The success of Haffkine's antiplague vaccination has been second only to that attending the use of diphtheria antitoxin. Yersin's plague antitoxin, which differs from Haffkine's vaccine in being obtained from immunized horses, is curative as well as immunizing. Dunbar, of Hamburg, has prepared in like manner an antitoxin for the treatment of hay-fever which 'produced immediate disappearance of the subjective and, after a few minutes, great amelioration of the objective symptoms.'

THE DANGER OF CORROSIVE SUBLIMATE SOLUTION AS A VAGINAL DOUCHE.—The *Medical Press* says: "It is strange that at the present time many medical men are found who continue to use corrosive solution for purposes of postpartum douching in spite of the clear demonstrations that have been made of its unsuitability and of its dangers, and in spite of the introduction of many safe and efficient substitutes. The use of this dangerous poison for postpartum douching is not alone confined to general practitioners, but it is used and recommended by many competent specialists. A case is recorded in an American contemporary in which a patient, aged thirty-three, who had miscarried at the fourth month, was given a single vaginal douche consisting of a quart of 1 to 1000 corrosive sublimate solution. The next day she exhibited all the characteristic symptoms of sublimate poisoning,—gingivitis, salivation, and diarrhœa,—the symptoms became rapidly worse, and she died a fortnight later. Of course, an antiseptic cannot be condemned because it is carelessly used with fatal consequences in a single case, and if corrosive sublimate had anything to very strongly recommend it, it would be foolish to do so. But what are its recommendations? It destroys metal instruments; it is a most dangerous lotion to leave about a house; it is decomposed and rendered useless in the presence of much albumin; it roughens the hands of the operator, and constricts the mucous membrane of the vagina and vulva, and so tends to encourage the occurrence of lacerations of these parts; and, as the case to which we have called attention shows, and as many other reported cases show, its use is by no means free from danger. The obstetrician who uses it himself is courageous, but the obstetrician who recommends it for general use to others—nurses or students—is foolhardy."

THE HYGIENE OF KISSING.—The *New York and Philadelphia Medical Journal* has a synopsis of an article in *Revue de Medecine* on this subject: "Féré observes that kissing is not only an expression of sentiment; it is, in addition, the means for exciting and exalting it. The act of kissing produces a physiological excitation apart from all association of ideas by the simple fact of irritation of the integument. Those portions of the face which are nearest the natural openings are the most sensitive, especially those portions which are contiguous to the lips and the extremity of the tongue. The teeth often enter into the act of kissing, and especially is kissing unattractive if the lips are unsupported by teeth. If the nasal passages are impermeable or adenoids are present the act of kissing is subjected to unfavorable conditions. The odor of tobacco and certain odors peculiar to certain individuals may render kissing repulsive. Among many savage tribes kissing is not practised. It is a mark of treachery, of disapproval, or veneration, or of religious fervor. It is often the medium by which very infectious diseases are propagated, notably syphilis, hydrophobia, leprosy, pestilence, purpura, itch, etc. The kissing of books or of religious relics is objectionable because unsafe."

"Kissing may cause traumatism by the action of suction: thus the skin may be injured, the drum membrane of the ear may be ruptured, the eyelids may be wounded. Children who are compelled to kiss others may acquire such a repugnance to it as to result in painful impressions when they are forced to practise it. The effects of sexual perversion by this means are well known. In a word, kissing is accompanied not only with dangers of traumatism and infection, but with those which are neuropathic, psychopathic, and moral. Promiscuous kissing should be suppressed, and it is especially desirable that an act with such possibilities for evil should not be forced upon children."

CAN THE RESPIRABLE PRODUCTS OF HUMAN WASTE HINDER DEVELOPMENT AND LOWER VITALITY?—The *Medical Record* in an extract from the London *Lancet* says: "John Hartley earnestly discusses this topic, which, he says, 'must from its very nature be either utterly fatuous or of truly vital importance.' He takes the latter view of it, and endeavors to show by familiar scenes and experiences in the crowded out-patients' departments of hospitals that the fallow, flabby, easily fatigued coming there are in this poor physical state because they have habitually inhaled an atmosphere made foul by the volatile products of human waste. These people are said to be as well fed on the average as the country poor. His argument is largely based on the ease and directness of absorption of such products as compared with the route by the stomach. Attention is directed to the well-known fact that muscular fatigue is coincident with the accumulation of muscle waste, and it is pertinently suggested that other people's waste is quite as capable of causing fatigue as our own. The author closes his interesting article with the thought that perhaps, after all, many of the ills usually ascribed to the high pressure of modern civilization may be more justly attributed to the effects of the toxins given off by our crowded population."

A SUGGESTION FOR THE TREATMENT OF ACUTE SEPSIS.—The *Medical Record*, quoting from a German contemporary, makes the following suggestion: "J. Wernitz believes that advance in the treatment of acute septic conditions is to be made not along the lines of serum therapy, but through methods of stimulating elimination of toxins from the blood. Free action of the skin and kidneys is the object aimed at, but the customary means employed—viz., subcutaneous or intravenous infusion of saline solution—has several disadvantages. In septic processes the heart muscle is weakened and the rapid introduction of a large volume of fluid is apt to overwhelm it, producing a paralysis which may be permanent. The administration of infusions is troublesome and painful, and the temptation is to give them less often but in dangerously large amounts. Owing to the complicated nature of the procedure, it is often postponed till a stage of the disease when it is too late to do good and is not without risk. The author recommends a form of colon irrigation which is very simple and can easily be carried out by the laity after a single demonstration by the physician. The patient is disturbed very little, and there is no danger of overtaxing the heart through too sudden introduction of fluid. An ordinary rectal tube is introduced into the rectum as far as possible without causing pain. It is connected with an irrigator containing one per cent. salt-solution and the fluid is allowed to flow very gently. As soon as peristalsis is excited the irrigator is lowered and the solution is allowed to flow back, usually bringing with it large amounts of fecal matter and accompanied by the expulsion of gas. This procedure is kept up until the intestine is thoroughly cleansed, the solution being replaced by fresh as often as necessary. As soon as the gut has been well cleansed it is ready for absorption, and similar irrigations may be given at hourly intervals, each irrigation taking about an hour. When the least discomfort or feeling of fullness is caused the irrigator is lowered or the current interrupted for a time. The results are speedily evident in a falling temperature, profuse diaphoresis and diuresis, less thirst, the skin and mucous membranes become moist, and the patient's general condition undergoes improvement. That this is due to the irrigations may be shown by omitting them and noting the return to the previous condition sure to occur."

TEETH REPLACEMENT.—The *Journal of the American Medical Association* says: "Earp reports a case in *Pediatrics* where four lower incisors were knocked out by an accident, with laceration of the gums and only slight attachment of tissue on the anterior surface. The injured parts and the mouth were treated with an antiseptic solution mainly of boric acid, the teeth replaced, and after firm pressure for five minutes were kept in place by a pledget of cotton saturated with the same solution. Sedatives were given to produce quiet and a liquid diet instituted. After a few weeks the teeth were firm and later became uniform and normal and healthy. He thinks nature will show a tendency to assist when there is ample vitality, as in childhood, and that the preservation of the teeth in this instance prevented depression, which, during the four to six succeeding years—the child being only sixteen months old,—would have changed the expression of the features. The cutting edges not being in apposition would have made mastication imperfect and impaired digestion. The successful reestablishment probably prevented a destruction of the germs of the permanent teeth and avoided deformity and malposition."

The editor of this department has personal knowledge of a case in which an upper incisor knocked out by violence was replaced and grew firmly in its original position.

THE DENTAL NURSE.—The *Journal of the American Medical Association* publishes a paper with this title, read before the American Medical Association at New Orleans by M. L. Rhein, M.D., D.D.S., which is of interest to nurses, particularly the following extract:

"In the State of New York, during the present session of the Legislature, a law is being passed placing the trained nurse under the jurisdiction of the State Board of Regents, which necessitates that she should possess the proper qualifications in education and practice. In view of the high esteem held for the work of the trained nurse, it appears remarkable that the sphere of her usefulness has not long since been extended to our own specialty.

"It would be an easy matter to add to the training-schools for nurses a department of dental nurses. Applicants for admission to such a course should be required to pass a satisfactory preliminary examination. Outside of the general didactic instruction which they should receive they should obtain additional instruction in regard to the oral cavity, etc., from a stomatologic member of the school's faculty. They would also receive their manual training under the same supervision, and in the hospital material they would find ample opportunity for perfecting their working technic.

"It is difficult to estimate in advance how much benefit would accrue to a large percentage of hospital cases if their mouths could be properly cleansed and rendered sterile.

"Would it be claiming too much to say that there are serious conditions where such treatment properly administered might prove the turning-point towards recovery or, in organic diseases, towards a material improvement in the general condition? Perhaps their greatest sphere of usefulness would be to place the mouths of patients in a sterile condition preliminary to undergoing surgical operations. When we consider all the devices used in the modern operating-room, all devoted to obtaining ideal aseptic conditions; when we consider the patient anesthetized in an atmosphere barren of pus germs, with the single exception that too frequently the patient's mouth is redolent with

putrescent filth, washed with secretions of pus,—when we consider such conditions with a celebrated surgeon about to enter into the digestive tract, can we longer question the value of the preliminary treatment by the dental nurse in such a case? Then there is the infirmary practice connected with all the large hospitals. Here is a field for the doing of the greatest good to this vast class of unfortunates. The cleansing of the mouths of properly selected patients in the dispensaries, combined with the proper education for preserving oral hygienic conditions, would be of greater value in the uplifting of the masses than any other means at present employed.

"Having graduated from the training-school, it would be in keeping with our other laws to compel the nurses to pass a State Board examination. The passing successfully of such an examination would then entitle them to be registered as trained dental nurses. Being so registered, they would be able to practise their profession in private life. By that is not meant the fact that they would be licensed to go around indiscriminately, cleansing the mouths of the people. Their license to practise dental nursing should mean that they are permitted to cleanse, polish, and medicate the dental territory only under the prescription of the patient's attending stomatologist.

"As chairman of your section, I ask your approval for this means of placing within reach of the human race the boon of prophylaxis in stomatology. There are three good reasons why it should receive your endorsement: First, it will tend materially towards the public good; second, it will open to woman-kind a new vocation second to none in desirability; third, it will materially aid the stomatologist in the quality of his results."

PROTECTION OF THE HEALTHY SKIN DURING THE APPLICATION OF THE RÖNTGEN RAYS.—The *Medical Record*, quoting from a German exchange, says: "G. Holzknecht and R. Grünfeld have devised a protective covering for the skin for use during the application of the Röntgen rays. It consists of a sheet of tin which is covered on both sides with a thin layer of hard rubber. The plate thus made may be of any size and shape desired and perforated by as many apertures as wished. It is very flexible and may be easily adapted to the various curvatures, etc., of the body. It is light and easy to handle, and may be sterilized, washed, or heated without damage. Its extended use shows that it affords a complete protection to the healthy skin from the burning and other annoyances which frequently attend the use of the application of the Röntgen rays."

COLLODIUM IN TREATMENT OF CARBUNCLE.—The following is taken from a German medical journal: "Dr. Hauße, of Eilenburg, calls attention to the far more rapid healing of a carbuncle when the immediate environment is painted with collodium. The hairs must be carefully shaved off and the centre of the lesion treated with sublimate or otherwise as needed. The layer of collodium protects the sound tissues and exerts a gentle pressure, both of which favor rapid repair."

COCAINE BEFORE CHLOROFORM.—Stuver, writing in the *Denver Medical Times*, says he has found painting the mucous membrane of the nose with a two per cent. solution of cocaine applied on a cotton-wrapped probe ten or fifteen minutes before beginning the anæsthetic, prevents vomiting. He thinks it would be quite as effective with ether.

HOSPITAL AND TRAINING-SCHOOL ITEMS



HOSPITALS

ON October 16 the trustees of the Massachusetts General, Boston, gave a reception at the hospital to celebrate the completion of the new out-patient department, and also to commemorate the discovery of ether. There was an interesting programme and many distinguished guests were present.

Needless to say, all of the building is equipped with the very latest surgical and medical appliances, everything being of the most approved design and calculated to give the best possible results, while patients also have the satisfaction of being in surroundings which are as pleasant as it is possible for a hospital to have. From roof to basement the building is, with the exception of a few rooms, floored with granolithic, assuring the permanence of the cleanliness which makes the interior so attractive at present.

ON September 11, 1903, Dr. Lederle, of the Board of Health, New York, appointed fifty-five health inspectors and thirty nurses to stations where they would meet the public-school children to separate those suffering from contagious diseases from the well before entering the schools on the 14th. The nurses go with the infected ones to their homes and give instruction to the parents how to carry out most efficaciously the prescribed treatment, so that the youngsters may return as soon as possible to their studies.

PLANS have been filed for the new building to be erected for the Women's Hospital, New York, to replace the old hospital at Lexington Avenue and Fiftieth Street. The building will be six stories high, with basement and attic, and have façades of granite, limestone, and terra-cotta. It will occupy the One Hundred-and-Tenth Street front of a plot, three hundred feet front and one hundred and seventy-one feet deep, between One-Hundred-and-Ninth and One-Hundred-and-Tenth Streets.

THE Burrage Hospital on Bumpkin Island, Boston harbor, has during the past summer accommodated two hundred and seven crippled and deformed children, most of whom were suffering from a tubercular bone infection. The hospital is dependent on the excursion-boats, and the time of sojourn is necessarily limited to three months.

PLANS have been filed for a new building to be erected on East Sixtieth Street for the Manhattan Maternity Hospital. The structure will be four stories high and fireproof throughout. There will be four wards (one for babies), four isolating-rooms, a diet kitchen, an operating-room, and an amphitheatre.

THE Sydenham Society has founded a hospital and dispensary at 347 East One-Hundred-and-Sixteenth Street, at which the poor may receive free treatment. The dispensary is situated on the lower floors, and on the upper floors there are twenty beds and an operating-room.

A COURSE of training in emergency surgical work and nursing (?) is to be given this winter at the Charlestown (Mass.) evening high school. Lectures will also be given in advanced physiology.

GROUND has been broken in Albany for a hospital for contagious diseases located near the Albany Hospital. The completion of St. Peter's Hospital is looked for by the end of the month.

A CHINESE hospital, the second of its kind in the United States, has been established on Park Street, New York. Patients, physicians, and nurses are all Chinese.

SOME OF THE WAYS HOSPITALS ARE BEING AIDED

A PAVILION GIVEN.—A beautiful new pavilion has just been added to St. Luke's Hospital, South Bethlehem, Pa. This pavilion consists of a ward of twelve beds, a nurses' office, a dining-room for convalescents, and a private ward of five rooms, an examining-room, a parlor, and a solarium. It has every convenience in the way of light and water and store-rooms, and the whole is most beautifully and completely furnished throughout.

In the ward is the handsome bronze tablet, which reads as follows:

"THE SAYRE PAVILION

"In memory of all those who by contribution of their labor or means have aided in making Saint Luke's Hospital helpful to the unfortunate.

"Erected by

"ROBERT HEYSHAM SAYRE,

"A. D. 1903."

Mr. Sayre is one of the most prominent men of this section of the country, and has been intimately connected with and deeply interested in the hospital since its beginning, always having been on the Board of Trustees and at present being the chairman of the Executive Committee.

AN ambulance has been ordered for the Parks Hospital, Glens Falls, and will be ready for use about February 1. The purchase of the ambulance has been made possible through the efforts of Mrs. William W. Maclay, who secured the fund by subscription.

THE Commissioners of Health, New York City, have taken a large house in the Borough of the Bronx and remodelled it as a hospital for the exclusive use of sufferers from trachoma.

By the will of the late Richard W. Foster the Clinton Hospital Association, Clinton, Mass., receives ten thousand dollars.

By the will of the late Royal P. Barry, of Melrose, Mass., the Melrose Hospital receives one thousand dollars.

THE addition to the Medfield Insane Hospital at Medfield, Mass., is to cost eighty thousand dollars.

TRAINING-SCHOOL NOTES

FRIENDS of the Boston Floating Hospital for infants will be pleased to know of the successful season of the post-graduate course of ten weeks. The closing exercises were held at the Maverick House on the evening of September 14, and consisted of an illustrated lecture by Dr. Arthur Willard Fairbanks showing special points in observation, and being especially interesting and instructive,

after which the diplomas were presented by the resident physician, Dr. Robert W. Hastings. Much pleasure at and appreciation of the benefit derived from the course were expressed by the nurses at various times. Following are the names of those taking the course this year with the name of the school from which they graduated: Annie W. Brown, Memorial Hospital, Concord, N. H.; Mary F. Baker, Memorial Hospital, Concord, N. H.; Emma W. Case, Pottstown Hospital, Pottstown, Pa.; Helen F. Carr, Massachusetts Homeopathic Hospital, Boston, Mass.; Susanne Clark, Presbyterian Hospital, Pittsburg, Pa.; Florence I. Corbet, St. Luke's Hospital, Duluth, Minn.; Annie I. Ferguson, Elliot Hospital, Manchester, N. H.; Mary E. Hennessy, Worcester Isolation, Worcester, Mass.; Signe Hammer, Jefferson Medical College Hospital, Philadelphia, Pa.; Ida M. Hickox, City Hospital, Worcester, Mass.; Bertha M. Jones, Pottstown Hospital, Pottstown, Pa.; Antoinette Light, University Hospital, Ann Arbor, Mich.; Florence A. McDonald, Whidden Memorial Hospital, Everett, Mass.; Mabel E. Naughton, Children's Hospital, Philadelphia, Pa.; Mary A. Pepper, University Hospital, Kansas City, Mo.; Florence N. Perdue, Lying-In Hospital, Providence, R. I.; Ella H. Plunkett, City Hospital, Boston, Mass.; Maude L. Parkes, Nathan Littauer Hospital, Gloversville, N. Y.; Martha M. Richards, Smith Infirmary, Staten Island, N. Y.; Marie Schwartz, Nathan Littauer Hospital, Gloversville, N. Y.; Florence Salmon, Grace Hospital, New Haven, Conn.; Laura M. Smith, Lying-In Hospital, Providence, R. I.; Jessica E. Skinner, Woman's Hospital, Chicago, Ill.; Mary E. Shannon, City Hospital, Cincinnati, O.; Harriet L. Turver, Grace Hospital, Detroit, Mich.

THE Training-School of Nurses of the Cleveland General Hospital recently graduated a class of eleven young women, the exercises being held in the auditorium of the hospital. The front of the room was banked with American Beauty roses, autumn boughs, and white drapings, forming the class colors, red and white, and every seat was taken when the class entered the room.

An interesting and appropriate programme had been prepared, consisting of an address of welcome by Dr. J. B. McGee, a vocal solo by Miss Pauline Hilker, and a piano solo by Anthony L. Maresh. The following is the personnel of the class: Nellie Prendergast, Malvern, O.; Martha Woodhouse, Dublin, Ireland; Edith Trimstead, Durham, Ont.; Nora Conroy, Wakeman, O.; Sarah E. Kellackey, Cleveland, O.; Ida Steurmer, Preston, Ont.; Blanche Rhodebeck, Woodview, O.; Emma Firestone, Fredericksburg, O.; Louisa Schinke, Pemberville, O.; Agnes Richardson, Ravenna, O., and Edith Biggs, Elyria, O.

THE graduating exercises of the Mack Training-School in connection with the General Hospital, St. Catharines, Ontario, Can., took place at the Court-House September 7, 1903, and the large number present testified to the interest which the citizens of St. Catharines take in the institution. Shortly after eight P.M. Miss Hollingworth, superintendent, entered the room followed by the three graduating nurses and nine pupil nurses. A short programme was prepared, consisting of solos, vocal and instrumental. Addresses were given by Mr. Laurie, chairman of the meeting, Mayor Burgoyne, Rev. Mr. Pickering, and Rev. Dr. Smith.

CHANGES among the officers of St. Luke's Training-School, Chicago, are as follows: Miss E. G. Rogers, 1900, has been appointed assistant superintendent; Miss Grace D. Van Kirk, 1903, to succeed Miss Rogers as surgical nurse; Miss Alberta Gage, St. Luke's, Chicago, 1901, former assistant superintendent St.

Luke's Training-School, Chicago, has been appointed superintendent of the Danville Training-School for Nurses, Lake View Hospital, Danville, Ill.; Miss Lois R. Williams, St. Luke's, Chicago, 1903, has gone to Christ's Hospital, Topeka, Kan., where she will be in charge of the operating-room.

THE Waltham Training-School for Nurses begins its new term. Heretofore the students were required to remain in the school three and one-half years before graduating, but the officials have decided to extend the course six months.

A change which goes into effect with the present term is relative to the ages of women desiring to enter. A nurse may now enter if she is eighteen years old and possesses the necessary qualifications. In previous years she was obliged to be at least twenty-one. No one over thirty-five is received.

THE Methodist Episcopal Hospital of Philadelphia recently received a donation of two thousand five hundred dollars for a Nurses' Home. Money was also received for a new Dispensary Building and another wing to the hospital. The latter is to contain three wards. Work on the Dispensary Building is to be begun at once, and it is hoped that all the buildings will be completed within a year.

MISS ALICE M. HODGSON, matron of the General Hospital at New Britain, Conn., for the past two years, has been elected matron of the Malden Hospital by the Board of Trustees of that institution. She was trained at the Boston City Hospital. Previous to going to New Britain she was matron of the Whidden Hospital at Everett, Mass.

THE post-graduate course connected with the Free Hospital for Women, Brookline, Mass., has proven very satisfactory. The applicants have been well-trained graduates from excellent schools. Their work has been very efficient and reflects great credit on their previous training. The classes begin October 1 and February 15.

A CATHOLIC women's association in Brooklyn, L. I., has organized a class of "Nazarene Nurses." This course is not intended to produce registered trained nurses, but simply helpers to settlement workers, missionaries, and physicians in their labors among the destitute sick. The course comprises ten weeks.

ON September 9 Mr. John Ross Robertson gave an "at home" at the Lakeside Hospital, Toronto Island, to which all the nurses of the city were invited. The weather was perfect and a large number of nurses were present. Miss Brent and her assistant received the guests.

THE third class of hospital apprentices to be graduated from the Naval Hospital at Norfolk, Va., received their diplomas on the second instant. The class of thirty-five were highly congratulated on their efficiency by Surgeon-General Rixley, who presented the diplomas.

MISS ADA CARR, for some years assistant superintendent at the Johns Hopkins Training-School and later in charge of the Visiting Nurses' Society of Baltimore, has been appointed superintendent of nurses at the Newport Hospital, Newport, R. I.

MISS MARY E. LENT, a graduate of the Johns Hopkins Training-School, has been appointed head nurse of the Visiting Nurses' Society of Baltimore.

STRATFORD, Ont., is about to erect a nurses' residence in connection with its Training-School.

PERSONAL

MISS MARY S. LITTLEFIELD, a graduate of Bellevue and for the past eleven years superintendent of nurses at the Episcopal Hospital, Philadelphia, has resigned the position and severed her connection with the school October 1. Miss Ada Payne, chief nurse of the Children's Hospital, San Francisco, Cal., will succeed her.

MISS CATHARINE DUNLOP, of the New York Training-School for Nurses, has resigned her position of superintendent of St. Luke's Hospital, Newburgh, for a much needed rest. Mrs. Mary Marquis, her assistant, a graduate of St. Luke's Hospital, Newburgh, has also resigned her position.

MISS M. L. FUNK, graduate of Jefferson Hospital Training-School, has returned from a Western trip, during which she visited places of interest in Chicago, Denver, Colorado Springs, Salt Lake City, Ogden, San Francisco, Los Angeles, and other places in California.

MISS MARION LITTLE, Class of 1900, University of Maryland, has resigned as superintendent of nurses at the Mission Hospital, Asheville, N. C., to accept a similar position at the Homœopathic Hospital, Washington, D. C., October 1, 1903.

MISS A. GOODRICH, superintendent of the New York Hospital Training-School, will be "at home" to the nurses during the winter on the first Wednesday evening of every month from half-past eight to ten o'clock.

MISS H. J. EWING, superintendent of nurses, Free Hospital for Women, Brookline, Mass., has returned from an interesting European trip, having visited the hospitals in Great Britain and on the Continent.

MISS HONNOR MORTEN, of London, England, visited Toronto General Hospital School for Nurses during the past month and presented a copy of Dr. J. K. Watson's book on nursing to the nurses' library.

MISS ALICE L. MACDONNELL, graduated from the New York Hospital Training-School in 1898, has accepted the position of superintendent of the Physicians' and Surgeons' Hospital at San Antonio, Tex.

MISS BELLE MACPHERSON succeeds Miss Estabrook as superintendent of the Elliot Hospital, Manchester, N. H. By the will of the late Charles Chase the hospital receives ten thousand dollars.

MISS ELIZABETH M. HEWITT, graduate of Columbia and Children's Hospitals, has accepted a position in the Washington College for Young Ladies, Washington, D. C.

MISS E. R. BAILY, late superintendent of Brightlook Hospital, St. Johnsbury, Vt., with Miss Marion C. Folsom, has just returned from a trip abroad.

MISS M. L. WYCHE, late president of the North Carolina State Nurses' Association, has recently taken charge of the Watts Hospital at Durham, N. C.

MISS ANNIE McDOWELL, matron of the Newton (Mass.) Hospital since 1892, has tendered her resignation, to take effect April 1, 1904.

MISS ISABEL MOODIE and Miss Mary Graham arrived safely in Dawson City on September 7. The journey was a most delightful one.

MISS MAREB ALLEN has been appointed head nurse of the Ross Memorial Hospital. She entered upon her duties September 1.

MISS MABLE STOCK has accepted the position of superintendent of nurses, Presbyterian Hospital, Allegheny, Pa.

MISS MARY ALLEN left Toronto on September 26 to return to her work in China as missionary.

MISS NELLIE MILLER is now lady superintendent, General Hospital, Brockville, Ont.



PRELIMINARY EDUCATION FOR NURSES ENTERING TRAINING-SCHOOLS.—The *Journal of the American Medical Association* has a short editorial on this subject:

"Of the utility of the trained nurse there is no longer any ground for discussion. From having originally been a luxury, to be availed of only by the wealthy few, she has become an every-day necessity, whose services are in constant demand among all classes of the community. In the process of evolution, the requirements of a good nurse have been gradually increased, and for the fulfilment of these the courses of study have necessarily been lengthened and the character of instruction has been correspondingly modified. Training in the mere practice of nursing can no longer be considered sufficient, but a thorough grounding in the principles of the work has come to be looked on as an important prerequisite. Like the medical student, so the pupil-nurse should come equipped for her pursuit with special as well as general educational qualifications. A plea upon these lines has recently been made by Dr. Francis P. Denny, and to meet the present need he lays down the following urgent requirements: 1. Leisure for study. 2. Instruction in the principles of nursing before beginning practical work. 3. Instruction by those especially fitted to teach. 4. Improved methods of instruction. That this need has been appreciated, in part at least, by others, and that steps have already been taken to provide the remedy, is shown by the announcement of the Drexel Institute of Philadelphia for 1903-4, that at the solicitation of Dr. S. Weir Mitchell and the superintendents of the leading nurses' training-schools of Philadelphia the Drexel Institute has undertaken to organize a preparatory course of instruction for such training-schools, including the subjects of anatomy and physiology, medical chemistry, materia medica, hygiene, bacteriology, domestic science and economics, as well as English language, vocal expression, and physical training. The course occupies about thirty-six weeks, and is divided into two terms. Certificates will be issued to those who complete the full course and pass the required examination. It is possible that work of a like character has been undertaken elsewhere, but it seems worth while to make a record of the beginning of a movement whose influence is likely to be most useful and far-reaching. Further, the experience gained from this work may serve as a guide to others engaged in other places in similar work. It is fitting that grateful acknowledgment be made of the part taken in the movement by Dr. S. Weir Mitchell, who has always exhibited the greatest interest in nursing and nurses, and who has in many ways done so much for the uplifting of his profession."

THE GUILD OF ST. BARNABAS

IN CHARGE OF

S. M. DURAND

Public Library, Boston



It is proposed to publish from time to time in the JOURNAL, whenever space will permit, a series of papers on things of general interest to nurses, and to discuss subjects about which many of us would like to say a word. Anything that binds us more closely together is an advantage, and free discussion helps to clear a subject to many minds.

Any friend of the guild, or, for that matter, any reader of the JOURNAL, is asked to send contributions on this subject, and we shall be glad to get as many different opinions as possible. The paper which appeared in last month's issue, called "What to Do with the Margin," formed No. 1 of this series, and it has struck us that it would be a good thing to hear from any who, though outside of the guild, take an interest in its welfare.

Two articles have appeared in our department lately on the subject of a central object for the guild work, one from Orange and one from Boston, and the same point of view was taken in each, that we were in duty bound to work for ourselves in our old age. This may be true, but surely the appeals from the Church Missions House appear to have roused a different spirit in the minds of many, for a goodly number of letters have been received asking for more information on this subject.

Now the council is approaching and the subject may come up again, and the question presents itself to us: Do we want to work only for ourselves, or shall we spread our influence more in mission work?

The term mission work often brings up before one's mental vision palm-trees, brown natives, huts, and, mayhap, if one have a vivid imagination, a jungle and tigers, and has a sort of "India's-coral-strand" effect, as it were.

We know, however, that a vast field is taken in by mission effort, and those who talk loudest against wasting money on the foreign field, and who claim most strenuously the right of the heathen to believe as he likes, are often open to the miseries of the poor in their own city.

We cannot all emulate the lady who was so devoted to missions that her friends laughingly declared they dared not present her with their photographs lest she offer them to the cause, nor even equal that pathetic tale which came out in some paper of the poor woman who for twenty years had saved money, little by little, to purchase herself a silk dress, and one night at a missionary meeting was so moved by an earnest appeal that she put her long-hoarded money into the fund asked for.

We grant these are extreme cases, but can't we do something? Nurses say they are worn out helping others anyhow, and there are rich people who have time and money for charitable work. This is very true, but do we not know that many of us felt a truer thrill of joy for the relief we were enabled in the hospital to give some poor, wretched patient than for all our hours spent in

private nursing over the sons and daughters of luxury, who could pay for anything they got, and who often felt that the money was all they need bestow?

Far be it from our purpose to decry well-paid nursing. The laborer is truly worthy of his hire, especially when the work is so exacting and when the laborer lasts, generally speaking, so short a time, but must this be all? The nurse does works of mercy always and wherever she may be working; it is impossible, from the nature of her work, that she should do otherwise, and why can we not send some of this mercy where it is most needed? Think of the missions open to us. The Church is constantly telling us of them, and in the dryest statistics of the State they appear also.

We hear of needy cases every day, and still the cry goes on: "I have my living to earn, and I cannot afford to do charity work." Perhaps some of us cannot afford it; some may be wage-earners for others, but some of us may do it, and if we cannot give our lives to it, we may occasionally give a little time as a rest and change from the unending round of well-paid nursing.

What, after all, do most of us earn but a living? and that we should have anyway.

We would beg the guild at large to think of this, to work for others if we may, to pray for mission work and workers always.

How many of us really give any time or money or prayer to missions? They seem so far away, so removed from our ordinary sphere of work, and it is sad but true that many of us consider that prayer is rather a weak and useless means of helping anything!

If we merely say a perfunctory and set petition at set times, this may be true, but earnest, hearty supplication can surely not be displeasing to the loving Father to whose ever-listening ear it is sent.

Why cannot some nurses, after a long season of "good cases," do a little charity work? Why cannot we feel it incumbent upon us to take an active and lively interest in some of the charities of our city? It is surely a bad thing to put a mercantile value on every bit of our professional work. There are many organizations for the benefit of nurses, sick-relief associations and other things of that sort, but if the guild as a whole would unite in some charitable and missionary effort it would surely be a blessed thing for us all.

Let us, at any rate, cultivate the missionary spirit, which is the spirit of love for our fellow-creatures. It is opening our hearts and taking all mankind into them. Surely this is the way to do work of any kind, and who can doubt its reward when we remember who it was that said: "As ye did it unto one of the least of these my brethren, ye did it unto me."

ORANGE, N. J.—The first meeting of our new year was held at Grace Church, Orange, on Thursday, October 1, the change from our usual date being made necessary by the late return home of members who have been away. A large attendance was a gratifying point, in view of the important meeting which followed the usual service, at which the rector and chaplain of the branch made a brief address of welcome, earnestly exhorting all to renewed efforts in guild work and the performance of their religious duties, the chief outward sign being attendance at church, for which there are such ample opportunities. Committees were appointed to draw up the calendar for the year and present it at the next meeting, also to gather suggestions for the needlework meetings during the winter. Another will report on the objects to be fully discussed at the council

meeting, on the central object to be worked for by the whole guild, and there are many who hope that the idea already sketched by "Orange" will be further developed and adopted. A discussion was raised as to the limit of those who may occupy the guild-room at the Nurses' Settlement. It was agreed to admit all graduate and pupil nurses who may desire to use it, guild nurses having the preference, and a committee was formed to take charge of applications and other matters that may arise. We announce with sincere regret the death of a recently admitted associate, who had for many years served most admirably as matron of the House of the Good Shepherd, who will long be mourned there by the aged inmates. Miss E. Breakey passed in her sleep to her eternal reward on September 21. Miss Lotta Layton is now in the Memorial Hospital suffering from typhoid fever, which we earnestly hope will only prove a light case. The Fresh Air work of the joint committees in the Oranges has had a most successful season. Two active members and one associate served as matrons during the three months, and graduate nurses gave their services for one week each during the entire time. About two hundred and fifty people were taken down to Bradley Beach in parties for one week, fully seventy-five remaining on for two or more weeks, according to the need of their cases.

THE Boston Branch of the Guild of St. Barnabas held its first meeting after the summer recess at St. Stephen's Church on the evening of Wednesday, September 30. There was a very good attendance for the first meeting after an interval, and we were glad to have with us the secretary of the Philadelphia Branch of the guild, who was visiting in Boston. At the business meeting a report was read on the subject of the Calendar Club of the Henry M. Torbert Memorial Fund, and we were glad to learn that our money had all been collected and paid. The delegates to the council were then elected. Miss Mary Sargent was the associate, alternate Mrs. Sprague, and Miss Caldwell was chosen as the member to represent us, the alternate being Miss Butt. The chaplain read a letter from Fitchburg, describing the progress made in our new branch, which was very gratifying. He also told us of the new dispensary work to be organized at St. Stephen's under the direction of Dr. George Monks and Dr. Horace Spinney, and asked that names of nurses who were willing to assist be given to him. This is certainly an interesting work, and we hope our members may show an inclination to help it on as far as lies in their power. Five names were proposed for membership and two members and one associate were admitted, Miss Head and Miss Day and Miss Alice Sargent. The usual social hour closed the meeting.

WASHINGTON, D. C.—The Guild of St. Barnabas had a most interesting meeting on the evening of October 5. The business of the guild was speedily transacted, and at eight o'clock the parlors of the Guild House were filled with an attentive audience, who listened with pleasure to an illustrated lecture given by Dr. Oliver Belt, one of Washington's excellent oculists. His subject was, "The Eye: Its Structure, Diseases, and Treatment," and the lecture was given in so clear a manner that even the uninitiated could understand and enjoy it. Rev. Dr. Buck, of Rock Creek Parish, our beloved and faithful chaplain, was one of the most attentive listeners. At the close of the lecture a vote of thanks was tendered Dr. Belt for the lecture so kindly given by him to the guild. Simple refreshments were then served, and an hour was enjoyably spent in social conversation. More lectures are promised us by other noted specialists in our city for future meetings.

OFFICIAL REPORTS OF SOCIETIES

IN CHARGE OF
MARY E. THORNTON



[We must ask contributors to this department to make their reports as concise as possible, omitting all mention of regular routine business, and stating such facts as are of special interest to absent members or to the profession at large. The JOURNAL has already increased its regular reading pages from sixty-four to eighty, and it must keep within these limits. In order to do this all of the departments are being condensed to make room for our constantly increasing items of interest.—Ed.]

THE AMERICAN SOCIETY OF SUPERINTENDENTS OF TRAINING-SCHOOLS FOR NURSES

THE Tenth Annual Convention of the American Society of Superintendents of Training-Schools was held at Pittsburg, Pa., October 7, 8, and 9. Owing to the excellent management of the Committee on Arrangements, the meetings of the convention were held in the Hotel Schenley, which was also the head-quarters of the members of the society. While the attendance was not large, the meetings were characterized by an unusual degree of enthusiasm. The papers were excellent, the discussions energetic, and at the close of the sessions it was generally agreed that the meetings had been exceedingly interesting and profitable as well. Owing to the very generous—and, in fact, lavish—hospitality extended to the society by the people of Pittsburg, it became necessary to encroach somewhat upon the time set apart for meetings, and the sessions were appointed for an earlier hour than usual.

The first session was called to order at nine-thirty A.M., the president, Miss Giles, in the chair.

The opening prayer was followed by brief addresses of welcome from the Rev. Maitland Alexander, president of the Board of Trustees of the South Side Hospital, and by Dr. J. H. McClelland, chief physician of the Homœopathic Hospital.

Graceful responses to these addresses were made by Miss M. Agnes Snively, superintendent of nurses, Toronto General Hospital, Canada, and Miss Anna Maxwell, the Presbyterian Hospital, New York. The Report of the Council followed, making the encouraging statement that there were twenty-three new candidates for admission to the society.

Letters of resignation were read and accepted from Miss A. I. Robinson, Galt Hospital, Galt, Canada, and Miss Sadie Young, Orchard Lake, Mich.

Letters of regret were read from some of the older members, notably Miss Linda Richards, Worcester Insane Hospital, and Miss Lucetta Gross, Buffalo General Hospital, and letters of greeting followed. Among them was the very interesting letter from the students of Hospital Economics at Teachers College, which we have pleasure in reproducing:

"TEACHERS COLLEGE, COLUMBIA UNIVERSITY, NEW YORK.

"Miss M. A. Nutting, Secretary Society of Superintendents.

"DEAR MISS NUTTING: We, the present Class in Hospital Economics, Teachers College, wish to extend greetings to the American Society of Superin-

tendents of Training-Schools for Nurses, and beg to acknowledge our indebtedness to that society for the splendid opportunities given us for this advanced work.

"We feel it a great privilege to be a part, however small, of this great university, and to be able to spend a year in this beautiful spot.

"We trust that our work may fully express our appreciation of the course, and of our interested and efficient instructor, Miss Alline.

"MARIE STOTZ, Secretary."

Letters were read from the president of the St. Louis Exposition, from the Mayor of the city, and various other important officials, inviting the society to hold its next annual convention in St. Louis during the Fair in 1904.

The treasurer's report showed not only an empty treasury, but a deficit, caused in part by the great expense of publishing the "Transactions of the Buffalo Congress," for which the society had never been reimbursed.

The report of the Publication Committee called attention to the fact that these "Transactions," which the society had partly paid for, were still unsold, and asked the consideration of the members of means of meeting this difficulty and consequent financial deficit.

In the address of the president the society was reminded of its useful efforts in the past and their far-reaching results. The president urged the society to enter upon the work of the session with a full realization of its importance and of the truly great questions which are requiring consideration and which it may be the Society's high privilege to help in solving, saying in conclusion that "we do not need to wish for tasks equal to our powers, but for powers equal to our tasks."

The reading of papers followed. The first subject was the "Teaching of Current Events," and the intention was to have a symposium of three brief papers on this subject, with the hope that each would present a different point of view, but at a late hour a member who had undertaken to prepare one of these papers was obliged through illness to withdraw.

The two remaining papers, the first by Miss Jane Delano, Bellevue Hospital, New York, the second by Miss Jennie Cottle, Minnequa Hospital, Pueblo, Col., presented somewhat the same point of view, and paved the way for a spirited discussion in which the conclusion was reached that the study of current events, whether in the form of regular classes, lectures, or informal talks, should find its way into schools of nursing. The first day's session closed with a paper on the "Modern Hospital and Nurse," by Miss Alice Griswold, of New York. The session adjourned to repair immediately to another floor of the hotel, there to partake of a very delightful luncheon given to the society by the three Alumnae Associations of the Allegheny General, the Western Pennsylvania, and the South Side Hospitals.

The second day opened with the election of new members, whose names follow:

Miss Katherine Brown, graduate of Presbyterian Hospital, Philadelphia, Pa.; superintendent of nurses, Hospital for Children, San Francisco, Cal.
Miss May H. Bennett, of the Medico-Chirurgical Hospital, Philadelphia; assistant superintendent of nurses, Minnequa Hospital, Pueblo, Col.
Miss Carolyn Van Blarcom, of Johns Hopkins Hospital, Baltimore; assistant superintendent of the same school.

- Miss Annie A. Chesley, of the Johns Hopkins Hospital, Baltimore; in charge of St. Luke's Hospital, Ottawa, Can.
- Miss D. Jeannette Copeland, of the Johns Hopkins Hospital, Baltimore; in charge of the York Hospital, York, Pa.
- Miss Grace Ellsworth, of the University of Michigan Training-School for Nurses; superintendent of nurses, Wesley Hospital, Chicago, Ill.
- Miss Susan J. Fisher, of Connecticut Training-School for Nurses; superintendent of nurses, Butterworth Hospital, Grand Rapids, Mich.
- Miss Olive Fisher, of Philadelphia Hospital Training-School for Nurses; superintendent of nurses, Cincinnati Hospital.
- Mrs. Harriet C. Humphrey, of Hartford Hospital; in charge of Litchfield County Hospital of Winchester.
- Miss Anne C. Jammé, of Johns Hopkins Hospital, Baltimore; superintendent of nurses, New England Hospital, Boston.
- Miss Elsie Mildred Lawler, of Johns Hopkins Hospital, Baltimore; assistant superintendent of same school.
- Miss Hannah Pauline Morris, of Boston City Hospital; superintendent of nurses, McKeesport Hospital, Pa.
- Miss Christine MacLennan, of St. Luke's Training-School, Chicago; superintendent of nurses, Lakeview Hospital, Danville, Ill.
- Miss Clara D. Noyes, of Johns Hopkins Hospital, Baltimore; in charge of St. Luke's Hospital, New Bedford, Mass.
- Miss Minna Russell, of Royal Victoria Hospital, Montreal; assistant superintendent of nurses, Lakeside Hospital, Cleveland, O.
- Miss Anna H. Ross, of Philadelphia Polyclinic; in charge of Carlton County Hospital.
- Miss Agnes D. Randolph, of Virginia Hospital, Richmond; superintendent of nurses, same hospital.
- Miss Harriet A. Sutherland, of Rhode Island Hospital, Providence, R. I.; in charge of St. Luke's Hospital, Utica, N. Y.
- Miss Annie L. Sutherland, of General Hospital, Toronto, Ont.; assistant superintendent of nurses, Lakeside Hospital, Cleveland.
- Miss Annie M. Shields, of Presbyterian Hospital, Philadelphia, Pa.; superintendent of nurses of Methodist Episcopal Hospital, Philadelphia, Pa.
- Mrs. Charlotte S. Taylor, of Lakeside Hospital, Cleveland; assistant superintendent of same school.
- Miss Maude P. Vaughan, of the Newport Hospital; superintendent of nurses, Germantown Hospital.
- Miss Mary J. Weir, of Western Pennsylvania Hospital; superintendent of nurses, South Side Hospital, Pittsburg, Pa.

The report on the course in Hospital Economics at Teachers College, New York, was then presented. This in brief showed a marked increase in the number of candidates, a continuous growth and development of the work in its various aspects, and a growing recognition by the public of its value as indicated by the numerous applications for those graduating from this course to fill hospital positions. The chairman of the Advisory Committee, Miss Banfield, stated that the work seemed in every way to be progressing satisfactorily except in regard to its finances, and urged the members of the society to further efforts to secure the means for the endowment which would enable the society to continue to carry on this work. It was pointed out that in view of the condition of the treasury

no help could be given to the work from that source at present, and individual interest must therefore be relied upon.

New business consisted in the presentation of a letter from the National Council to the president of the American Federation of Nurses in reference to the representation of that body at the forthcoming International Congress at Berlin in 1904. The state of finances rendering it impossible to consider sending delegates, it was decided that representation could only be secured by appointing to that office some one already in Berlin, or one of those intending to be present under any circumstances.

Miss Nutting then presented a brief statement concerning some recent educational advances, notably those within the last year, which have opened up courses *preparatory to nursing* at the Drexel Institute, Philadelphia, and at the Pratt Institute, Brooklyn, N. Y., and have caused similar plans to come up for consideration in other institutions. Attention was called to the increase in the number of instructors appointed and paid to teach special subjects in training-schools, and to a growing tendency to introduce what is called the non-payment system, using the funds thus released for the better housing, instruction, and general welfare of the pupils. The speaker suggested the advisability of the appointment by the council of a small Committee on Education to follow and note all advances and improvements in this direction and to keep the society informed.

The society was then called to consider the recent resignation of Miss L. L. Dock as secretary, who for so many years had so admirably filled that important and difficult position. It seemed impossible to speak too highly of the efficient way in which these honorary duties had always been performed, or to pay too high a tribute to the untiring spirit of devotion to the interests of the society which had helped so largely in its development. It was felt that the society could in no way express its gratitude to Miss Dock for her zealous and unwearied efforts. It desired to place on record its full recognition of the value of these services.

The secretary here read a report from Mrs. Dita H. Kinney, the superintendent of the Army Nurse Corps, presenting in a very interesting manner the changes and achievements of the year, and showing clearly the growing favor in which this very important work is held. The report will appear in full in the proceedings.

The first paper at this session was a description of the new Lying-In Hospital in New York, by Miss C. Louise Burdette. The paper dwelt particularly upon the methods of heating, lighting, and ventilating employed in that institution. At its close some interesting views of the building and interior were passed about among the audience.

The second paper was by Miss Annie W. Goodrich, superintendent of nurses, New York Hospital, on "Some Common Points of Weakness in Hospital Construction." The subject was handled with conspicuous ability, and extended to cover in a measure hospital equipment as well as construction. It was listened to with great attention and followed by a long and earnest discussion. It seemed evident that this matter was one of very large import, to which the society would do well to give further attention.

Miss McKechnie's paper, read by Miss Greenwood, on the "Progress of Legislation" opened up an interesting discussion, and her suggestions later took form in the appointment of a committee to outline for the use of State associa-

tions and others desiring such assistance the society's accepted standards of the minimum requirements for registration, embodying

1. Entrance requirements to schools of nursing, with definite minimum requirements.

2. A definite course of study, with minimum of subjects, time to be devoted to theory and practice, and minimum length of course of training.

The morning session closed and members adjourned by means of specially provided trolleys to the Western Pennsylvania Hospital, where a luncheon was served to the society. After this a demonstration was held in the amphitheatre, which formed one of the most interesting features of the programme. Nursing methods and appliances in use in the New York City Hospital were described by Miss Goodrich, and their uses as far as possible carefully demonstrated, the various electric heating appliances attracting particular attention. Two beautifully made and ingenious swathes, restraining sheets, and waists for irrational patients and an excellent head-bandage were exhibited and their use shown by Miss Hannah Morris, from the Boston City Hospital. The Presbyterian Hospital showed a dainty device for applying an ice-poultice to the throat, appliances of much ingenuity to facilitate the giving of infusions, and other matters, all of which were very attractively demonstrated by Miss Williams, a pupil of the school. The following articles from the Johns Hopkins School were shown and described by Miss Carolyn Van Blarcom, assistant superintendent: a stretcher for lifting patients to and from tubs; an asbestos pipe for giving sweat-baths; an apparatus for supplying steam; extension stockings; tray cover supports, etc. This completed the work of the second session, and proved to be an interesting innovation, which promises to add greatly to the value of future meetings of the society.

The session of the third day began with the election of officers; and following this came a brief informal talk by Miss Palmer on the present status of THE JOURNAL OF NURSING, urging the members to further efforts in helping to maintain its value and interest.

The paper on the "Power and Responsibility of the Society in Public Action," by Miss L. L. Dock, was read by the secretary and aroused much interest and discussion. A very direct practical result came in the form of a resolution from the society protesting against the correspondence schools now so freely advertised.

A most excellent and suggestive paper, by Miss Isabel McIsaac, on the "Teaching of Hygiene" now followed, showing how little in our schools and hospitals we conform to many of the laws of hygiene which we teach. It was a matter of great regret that owing to pressure of time the discussion of this paper could not be prolonged.

The programme closed with a carefully prepared talk on "Modern Hospital Construction," given by Mr. Frank Miles Day, of the well-known firm of architects in Philadelphia. Mr. Day's remarks were full of instruction and information of a kind very difficult to obtain, and the society felt that it should be congratulated upon having secured so able a representative of a subject of importance to all of its members. At the close of this address Mr. Day remained for a species of conference, answering freely the many questions presented to him.

A brief recess followed this, and a short memorial notice of Miss Florence Hutcheson, a member of the society, who died during the year, was presented.

It was then announced that the society would hold its next meeting in Washington in January, 1905. The president-elect was introduced, and in a few words welcomed the society to Washington for the next convention, and with the usual resolutions and hearty vote of thanks the meeting adjourned.

Detailed descriptions of the entertainments, which were planned and carried out on a very generous scale, would occupy more space than is afforded us. From the delightful luncheon at the Hotel Schenley, given by the groups of Alumnae Associations before referred to, an entertainment unique in idea and beautiful in expression, to the final reception at the Homœopathic Hospital, given by the trustees and Ladies' Association, there was hardly an hour of any day outside of sessions that was not pleasantly provided for by the forethought and ingenuity of the president and those associated with her in preparing for the convention. The reception on Wednesday night by the Pittsburg Training-School Association was given in the beautiful ball-room of the Hotel Schenley, lavishly decorated for the occasion with palms and plants. An orchestra provided an abundance of music, and the utmost hospitality prevailed.

The banquet on Thursday evening, arranged by some of the hospital superintendents, was a most sumptuous entertainment. A large number of guests was invited, among them a good many medical men. The decorations were beautiful, the menu elaborate, the toasts and responses enlivening, and nothing was omitted which could afford pleasure to those present. Of the visits to Homestead and other interesting places it can only be said that they were intensely interesting to the members, who found in them events long to be remembered. Members of the society carried away with them at the close of the convention memories of three days of good and stirring work, and of much pleasant entertainment and genial hospitality.

The following officers were elected for the coming year:

President, Miss Georgia M. Nevins, Garfield Hospital, Washington, D. C.
First vice-president, Miss Ida F. Giles, Homœopathic Hospital, Pittsburg, Pa.
Second vice-president, Miss Jennie Cottle, Minnequa Hospital, Pueblo, Col.
Secretary, Miss M. Adelaide Nutting, Johns Hopkins Hospital, Baltimore.
Treasurer, Miss Anna L. Alline, Teachers College, Columbia University, N. Y.
Auditor, Miss Mary A. Samuel, Roosevelt Hospital, New York.
Councillors—Miss Sophia F. Palmer, Rochester, N. Y.; Miss Isabel McIsaac, Chicago, Ill.

M. A. NUTTING, Secretary.

SPANISH-AMERICAN WAR NURSES—REPORT OF FOURTH ANNUAL MEETING

PRESIDIO, SAN FRANCISCO, CAL., August 21 to 26, 1903.

While the city was yet gay with banners in honor of the just departed Grand Army of the Republic, the band of Spanish-American War Nurses were welcomed by their comrades, Miss Helene Gottschalk and Miss Amanda Armistead, at the General Hospital of the Presidio, the extensive and well-kept military reservation bordering on the Golden Gate.

Luncheon was at once served, after which the 'busses of the Quartermaster's Department were brought into requisition and the entire party driven through the Presidio grounds and the Golden Gate Park, where they spent a delightful afternoon. On their return from the drive a tea was served. In the evening many nurses availed themselves of the cordial invitation to attend a reception at

the head-quarters of the Spanish-American War Veterans, who were holding a convention at that time in San Francisco.

The first business session was held in Albion Hall, in Alcazar Building, 120 Farrell Street, from ten A.M. to twelve o'clock, August 22.

The fourth annual meeting was called to order by Miss Amanda J. Armistead, president of Camp Golden Gate, California. After briefly stating the object of the meeting and reporting the unavoidable absence of the president, secretary, and treasurer, nominations for permanent chairman, to be selected from the vice-presidents in attendance, were called for. By unanimous vote Dr. Mary Esser, vice-president, from Camp Liberty Bell, Philadelphia, Pa., was elected. Miss Rebecca Jackson, of the same camp and city, was elected secretary pro tem. In accordance with a resolution adopted at the last annual convention, in Washington, D. C., empowering the president to employ a clerk, Mrs. F. H. Colburn, of San Francisco, was appointed to attend to the clerical details of the meeting.

Upon roll-call the following active members answered to their names: Sarah A. Bauer, Minnie Cooke, Mary E. Esser, Helene M. Gottschalk, Lauretta Hughes, Mary B. Howland, Rebecca Jackson, E. B. Jones, Lena Luda Konkle, Elizabeth McCoy, Edith H. Rutley, Lillian C. Riley, Mrs. Henry C. Smith (formerly Sadie Payne), Rhoda D. Sutcliff, Eva Dora Weber, Isabelle J. Walton, Frances M. West, Eleanor E. Williams, and Agnes C. Young.

The president's address was then read as follows:

"To the Spanish-American War Nurses in their fourth annual meeting assembled I send most cordial and heartfelt greetings. It being, to my most sincere regret, impossible for me to attend the meeting in person, all I can do is to send my love and best wishes, together with a report of what has been done during the past eight months and what plans are on foot for the coming year. Activity has been shown in various directions, and several questions are to be presented for action at this time.

"MONUMENT.

"At the first meeting of the society one of the earliest members presented a plan of hers for the erection in the National Cemetery at Arlington, Va., near Washington, of a monument in memory of the nurses who died in 1898. The idea was approved, and a fund for the purpose was started. Delay was experienced through the failure of the Secretary of War to give his approval, but I have now received assurances, both from the Secretary and from the new Quartermaster-General, that if we so desire we may erect a simple and artistic monument in the centre of the plot in Arlington which has been set aside for army nurses serving in and since the Spanish War. I would call your attention to the fact that as yet (the whole matter having so long been in abeyance) no decision has been reached as to the exact persons it is intended to honor. The original idea was to include the trained nurses, untrained "immunes" (together numbering about seven), Catholic sisters (five), and male contract nurses (number unknown to me) who died in 1898, either while under contract or shortly after annulment of contract and as a result of army service. Hospital corps men, being enlisted, were not included, but all entitled to burial in our plot were included.

"As a matter of fact, not one of the persons above specified was actually buried in Arlington in 1898, nor, indeed, was any plot there then. According to a report this month from the War Department two women and two men are now buried there—viz., Mrs. Anna Campos and Mrs. Isabella B. Bradford, both untrained 'immunes' who served in 1898 but died later (if my memory is correct);

Mr. John H. Greeley and Mr. Samuel J. Fitzgerald. It is evident that our society does not care to erect a monument to the nurses actually buried in Arlington; it is also evident, although many of us hope one day to have the honor of lying in our National Cemetery, that we cannot at this time erect a monument to ourselves. There remains, then, the question, Shall all the contract nurses dying in 1898 be included, or would you limit it to women nurses, whom we could more properly call 'our comrades,' or even to the few trained nurses who gave their lives? I greatly regret that I have not the list at hand, owing to absence from home, but according to my memory *about* five trained nurses died.

"Your Committee on Monument presents a report regarding designs and cost. In a recent interview with Quartermaster-General Humphreys he told me that a simple stone, with inscription, if of graceful outline, costing perhaps less than one thousand dollars, would be acceptable. For this price we could not have bronze tablets or bass-reliefs or elaborate carving, but the general size and dignity of the monument would be the same as proposed by the committee. I owe an apology to the committee for sending this information directly to you, but I chanced to see General Humphreys while he was on a brief vacation, too late to be of service to the committee.

"After you have heard the committee's report, I ask you to vote on the resolution included in it, adopting or rejecting it in toto, or altering it as you see fit. Also that you vote specifically regarding persons whom you intend to honor. If the monument is to be erected, a contract should be made at an early date, and the fund (now amounting to three hundred and forty-one dollars) should be increased to the desired amount.

"FINANCES.

"It is a pleasure to note that our life-membership list includes eighty names. Let me appeal to all members present to send in at once their ten-dollar fee, as it is highly desirable that we have as many life members as possible. This money is not spent, but is invested as a permanent fund, the interest on which may be used for current expenses if necessary or may be otherwise utilized. It is my purpose to recommend to the next meeting of the society such changes in the by-laws as will merge the benefit fund in the permanent fund, so that while not appearing as a benefit society (which is undesirable if we incorporate) we shall yet have some income which can be used for benefit or other desirable objects, as the society may desire. Benefits will be far more needed in the future than at present, and I think we should provide for that future by having our dues all paid up now, and at the same time having a nice little permanent fund invested and bringing in interest. I regret to say that the treasurer has not bought the bonds, as instructed at the last meeting, but presume that will shortly be done. Meantime the money is in a good savings-bank. The present treasurer was not willing to be bonded, so that is also a matter to be taken up by the new officers to be elected at this meeting.

"The treasurer reports a surprising number of delinquents—can we not reach them somehow?

"The list of members, ordered printed in *THE AMERICAN JOURNAL OF NURSING* on condition that it could be so printed free of charge to the society, did not appear, owing to the large expense entailed, as the *JOURNAL* stated that the society must bear all expense.

"Shall we reprint the list ourselves? Shall we reprint the constitution and by-laws, as the old edition is exhausted?

"NAVY NURSE BILL.

"The original bill providing for trained women nurses in the navy, as prepared by Dr. Boyd, U. S. N., amended by a committee from our society, and introduced in the United States Senate at our request, was referred to the Navy Department and there promptly killed by the opposition of the army to anything so much superior to what the army nurse corps had. We had intended to get the good things for the navy and then promptly ask them for the army too, but that 'was not to be.' The Surgeon-General of the Navy then took the army law as a basis, and after the army representative had made two or three suggestions, referred it to me. I wrote it over several times, each time seeking approval for some point of advantage, and when at last it seemed the best that could be obtained it was reintroduced in the Senate (at my request) and went before the Secretary of the Navy in the new form.

"The Secretary assured me that he fully appreciated the advantage of having trained nurses, but he finally disapproved the bill and asked for one merely giving authority for employment of nurses at army rates under regulations for any Secretary to make or change. This, of course, no one else wanted, and so the matter rests till the next Congress convenes. I have received encouragement from both houses of Congress, but, unfortunately, it is exceedingly difficult to secure passage of such a bill over the Secretary's disapproval. I hope he may be persuaded to change his mind! If he does, we are sure of success—if not, it is doubtful. Time does not permit giving in detail the sections of the bill, but it appeared in the JOURNAL, and my reports of progress, as your committee, were both in that magazine and in the *Trained Nurse*.

"FUTURE MEETINGS.

"The Spanish War Veterans have invited us to attend the social features of their next annual encampment at New Haven, Conn., September 28, 29, and 30. I expect to be present, and so do quite a number of our members. I suggest that your next president immediately appoint a committee to confer with the Veterans at this encampment regarding some form of alliance as suggested by officers of the Veterans, and would suggest that a mutual recognition of each other's existence and good-will would be entirely appropriate and helpful. A resolution may be passed by you now if desired, or the matter may wait till next year.

"Arrangements have already been made for our next meeting in St. Louis, and the hall for a meeting-place has been kindly offered us by the Board of Lady Managers. The Exposition authorities have voted us special recognition in giving us a day, September 10, 1904, in conjunction with the Spanish War Veterans. Miss Robins fortunately secured this recognition for us, and our meeting should be held just before or after that date. The Veterans will meet there at the same time. I ask for a vote of approval of these plans.

[Note.—See report of New Haven gathering for change of date to end of September.—A. N. M.]

"HISTORY.

"I beg to lay before you a plan for work which I believe our society peculiarly fitted to perform. I propose that we combine to 'write a picture' of 'Nursing in the Spanish War,' such as will give a vivid account of all sides of your lives with the army. Each hospital should have a committee to see that

it is properly presented, and that all sides—work, pathos, humor—are shown. I shall, if you will help me with this field part, prepare the full record of the administrative work and statistics. Whether this shall form the whole book, or whether I shall write also chapters on related historical subjects, will be a question that must be decided later. After the book is well under way its exact contents, in addition to the Spanish War part, must be determined. The same is true of the question of whether I shall personally publish the book or whether the society will undertake it. I have been in correspondence with well-known publishers and shall be guided by their judgment. Probably it should have a subscription list among our members, for as the life of the nurse in the Spanish War is to be the central idea, all will want it. Let us do the work this year and be ready with a report for further instructions at the St. Louis meeting. Will you join me in it?

"And now *au revoir!* I hope your next president will enjoy her office and her close association with our brave army nurses as much as I have done! Wherever you go, God bless you!

"ANITA NEWCOMB MCGEE."

Greetings were read from Margaret J. MacPherson, Camp Hope, Providence, R. I.; Chas. R. Greenleaf, Redondo Beach, Cal.; Lela Wilson, Jamaica Plains, Mass.; Theresa Erickson, Santa Fé Hospital, Albuquerque, N. M.; Alice P. Lyon, Camp Roosevelt, New York City. Upon motion of Miss Gottschalk, seconded by Miss Armistead, the greetings were accepted and placed on file.

Reports were read from Camp Roger Wolcott, Boston, Mass.; Camp Liberty Bell, Philadelphia, Pa.; Camp Roosevelt, New York City, and from Camp Golden Gate, San Francisco, Cal. Upon motion of Miss Walton, seconded by Miss Gottschalk, the reports were received and placed on file. No reports were at hand from Camp Anita Newcomb McGee, Washington, D. C., or Camp Hope, Providence, R. I.

It was moved, seconded, and carried to dispense with the reading of the minutes of the last annual meeting.

The report of the corresponding secretary was then read, as follows:

"It is but eight months since our memorable meeting in Washington, D. C., and there is but little for your corresponding secretary to report. One member has died, one has entered a convent, and eleven marriages have been reported. It has been a source of much gratification that so many members have been careful about sending changes of address. Never before has so much care been exercised in this regard, and it is fully appreciated. It seems strange that at this late date any member should not know that the life membership is ten dollars, and not eight dollars. If members would only read carefully the printed reports and the circulars sent them, they would save much of their own time, as well as that of others. The idea of the local organization, the "Camp," certainly was a happy one. Six camps are now flourishing in as many cities; they are of the greatest service in keeping members in closer touch, hunting up those who have been lost, and in bringing forward candidates for membership. One camp has sent to the corresponding secretary a report of each meeting, a courtesy much appreciated. It is earnestly hoped that Chicago, Brooklyn, St. Louis, and Manila may follow the example of San Francisco, Washington, Providence, Philadelphia, Boston, and New York. We have now five hundred and seventy members, of whom eighty are life members.

" OBITUARY.

"Death has claimed but one of our members since our last meeting. Mrs. Pusy Wollaston, Elizabeth N. Hallowell before her marriage, died of pneumonia on February 23 at her home in New Garden, Pa. Mrs. Wollaston joined the Spanish-American War Nurses in the spring of 1900; she was a graduate of the Philadelphia Lying-In and Surgical Hospital, graduated in 1889. She served in the Second Division Hospital, Jacksonville, Fla., also in the hospital at Camp Cuba Libre. She was in the army from October 23 to November 24. She attended our first meeting in New York, but not since. One of the Spanish-American War Nurses writes thus: 'I was present at her burial and asked the privilege of pinning on her a Spanish-American War Nurse badge, which was granted.'

"HARRIET CAMP LOUNSBERY, Corresponding Secretary."

After the acceptance of this report, that of the treasurer (Mrs. Lounsbery) and the auditor's certificate of a bookkeeper of Charleston, W. Va., were read. [Note.—The treasurer's books are to be audited by a committee of the society before the bonding. When this is done report will be published.—A. N. M.]

A very full and complete report from the Monument Committee was read, relating especially to designs proposed by sculptors and by Tiffany & Company, and costing at least three thousand dollars. Upon motion it was received and placed on file, with the request that the chair appoint a committee of three to report upon the following resolution contained in the report:

"Resolved, That the society proceed as soon as possible to the erection of the proposed monument to deceased army nurses in the National Cemetery at Arlington, Virginia, and that to this end the monument fund be increased to at least three thousand dollars; that a committee be elected to select a sculptor who shall make a design satisfactory to the committee and to the Secretary of War, and with whom a contract for erection of the monument shall be made."

Report signed by Esther V. Hasson, chairman, and Susie F. Saunders, Monument Committee.

The chair named Miss Armistead, Miss Walton, and Miss Rutley as the special committee.

At twelve-thirty o'clock the meeting adjourned to meet Monday, August 24, at ten A.M.

At two P.M. the visitors were tendered a trolley ride on the commodious car "Atlanta" by the nurses stationed at the General Hospital at Presidio and the members of Camp Golden Gate jointly. The ride included the Cliff House, Golden Gate Park, Mission Dolores, and other points of interest.

In the evening a reception was tendered the nurses at the Sorosis Club House, 1620 California Street. Major Kendall, commanding officer of the General Hospital, Presidio, made an appreciative and happy address of welcome. Golden Gate Camp was assisted in receiving by a number of officers and their wives, and during the evening some excellent music was rendered. Felicitous remarks were made by the British Vice-Consul, Courtenay W. Bennett, who found much to praise in the humane work of the trained nurses of the British and American armies. Colonel Kilburne, Chief Surgeon of the Department of California, told some good stories about the nurses serving under him during the war with Spain. He managed to make his reminiscences very favorable to the nurses, even

when his auditors laughed at the situations depicted. During the evening dainty refreshments were served and those in uniforms made themselves useful in looking after the comfort and pleasure of the invited guests and visitors.

On Sunday afternoon, from four to six o'clock, an informal reception was tendered the Spanish-American War Nurses by the Nurses' Settlement at 420 Tehama Street, San Francisco. The visitors made a thorough inspection of the work done here and expressed themselves much pleased with the results. This settlement is making a brave effort in the face of many obstacles to do effective work among the poorer classes, and is quite in accord with the Hull House plans being tried here and in other large cities.

On Monday morning, August 24, the second business session was called to order at Albion Hall, Dr. Mary Esser, vice-president, in the chair. Miss Rebecca Jackson, of Camp Liberty Bell, Philadelphia, acted as secretary pro tem. Upon roll-call twenty-one members were found to be present.

By unanimous vote five candidates were elected to active membership—viz., Elizabeth Hogan, Elizabeth Xander, Kate M. Walsh, Eleanor B. Nicholson, and Margaret McDonald.

The next order of business was the election and nomination of officers for the ensuing year. Miss Eva Dora Weber, of Golden Gate Camp, nominated Dr. Anita McGee for president. Half a dozen delegates seconded the nomination, and upon motion the nominations were closed and the secretary was instructed to cast a unanimous ballot. While this was being done the assembled nurses stood in honor of the signal service already rendered by Dr. McGee.

Out of seventeen nominations for vice-president the following received the highest number of votes and were declared duly elected for the ensuing year: Mary E. Esser, Amanda J. Armistead, Annie A. Robbins, Isabelle J. Walton, Isabel E. Cowan, Helene M. Gottschalk, Esther V. Hasson, Elizabeth Stack, Frances M. West, and Sarah Whelpton.

Miss Lela Wilson and Mrs. Harriet Camp Lounsbury were unanimously reelected respectively recording secretary and treasurer.

At twelve-thirty a recess was taken until two P.M.

Afternoon Session, 2 P.M.

Miss Rebecca Jackson having left the city, the chair appointed Miss Amanda J. Armistead to act as secretary pro tem.

The president's address was taken up for discussion of its topics seriatim. The report of Miss Armistead, chairman of the Special Committee on Monument, was verbal and recommended a general discussion by all those present. After discussion a vote was finally passed to postpone definite action until the next annual meeting.

It was moved, seconded, and carried that the bonding of the treasurer be referred to the Executive Committee with power to act. [Note.—Treasurer reported to Executive Committee at New Haven, September 30, that bonding would be attended to promptly as soon as Auditing Committee work was done.—**SECRETARY.**]

It was moved and carried that delinquent members be notified by the treasurer of the amount of their arrears through the medium of first-class mail postage, as second-class matter is not forwarded, and again asked to pay their dues.

It was moved and carried that the constitution and by-laws be printed and mailed to each member under first-class postage, that the booklet contain a revised list of members to date, that each member be asked to remit ten cents to cover expense of same, and that the president and corresponding secretary be empowered to do the necessary work.

It was moved and carried that special attention be called by the corresponding secretary in her circular to delinquents to the fact that the dues date from joining the Spanish-American War Nurses, and that a fee of ten dollars additional makes them life members.

It was moved and carried that Dr. McGee be empowered to designate the hospitals and appoint the necessary committees to collect the data needed for the preliminary work of compiling a complete history of the nurses' work in the Spanish-American War, with instructions to report at the next annual meeting, at St. Louis in 1904. At first there was some misapprehension on the part of the nurses as to what was requested of them individually when the report of the president was read asking for data for a complete history of the nurses' work in the Spanish-American War, each one seeming to feel that it was a stupendous undertaking, but when Miss Walton explained that it was just a "reminiscence meeting" written out in full, promises of written accounts of actual field work were readily given. A general reminiscence meeting at St. Louis was asked for by all, and the president is respectfully requested to arrange for it.

By a unanimous vote Miss Irene Sutcliffe, of South Norwalk, Conn., was made an honorary member. Several nominations for honorary members were made, and, as usual, laid over until next meeting. Letters of greeting and acceptances of honorary membership were received and placed on file from the following: General George M. Sternberg, Mrs. Bell M. Draper, Miss Ella Loraine Dorsey, Miss Mary Desha, Mrs. Royal M. Gage, Mrs. M. Antoinette Gilston, Mrs. Whitelaw Reid, Miss Mary Wadley, Mrs. Ella Hardin Wallworth, Miss Lucy L. Wheeler, Miss Julia K. Wheeler, and Miss Carrie P. Wheeler.

Hearty votes of thanks were given to the various individuals and societies entertaining or showing other courtesies to the nurses.

The fourth annual meeting then adjourned *sine die*.

An entertainment which was appreciated in the highest degree was that given by the Pacific Coast Graduated Nurses' Club on Tuesday evening, August 25. This newly formed organization took the war nurses for a trip through Chinatown, including boxes at the Chinese theatre and tea and cakes at a Chinese restaurant.

An additional interest was given to the evening by the fact that the party was escorted by an official guide, Sergeant James P. Chadwick, who is a Spanish War veteran and who had hastened to offer his services to the nurses.

On Wednesday evening, August 26, the Children's Hospital Nurses' Alumnae Association gave the Spanish-American War Nurses a reception in their home. The Board of Managers of the hospital and the medical staff with their wives assisted in receiving. An interesting programme, including music, was given, the hospital was thrown open, and everything combined to make this closing event a memorable evening. The meeting, in spite of the very small attendance, was a noteworthy one from the number and variety of the invitations received and especially the cordial hospitality offered by the army and the San Francisco nurses.

ANITA NEWCOMB MCGEE, President.

LELA WILSON, Recording Secretary.

NOTICE

THE new list of members is being revised in readiness for the publication of the proceedings of the recent convention of the American Society of Superintendents of Training-Schools for Nurses. All members whose addresses have changed since the last date of publication are requested to send the correct address to the secretary without delay.

M. A. NUTTING, Secretary.

SCHOOL NURSES DURING VACATION

THE School Nurses have started their fall work, beginning with the opening of the session September 14. The staff numbers twenty-eight, as formerly, no other appointments having been made except those to fill the vacancies caused by nurses giving up the work.

During the vacation a very important and beneficial work was taken up. A number of the nurses were detailed by the Department of Health to make daily visits to children under one year of age, who were suffering from the various diseases incident to young children during the summer months and who were not receiving any care from other sources. A great deal was done by instructing the mothers in regard to food, bathing, fresh air, etc. Milk and ice tickets were given for distribution and also tickets for the St. John's Guild Floating Hospital.

The results were very satisfactory, considering there was not as much sickness on account of the cool summer.

LINA L. ROGERS.

NEW JERSEY STATE ASSOCIATION

THE second annual meeting of the New Jersey State Nurses' Association will be held at Mercer Hospital, Trenton, N. J., on Tuesday, December 1. A large attendance is desired.

PROGRAMME.

One-thirty P.M., greetings and registration.

Two P.M., call to order.

Prayer by the medical director of the Mercer Hospital.

Address of welcome.

Response by president.

Addresses.

Report of Committee on Arrangements.

Reading of minutes of last meeting.

Secretary's annual report.

Treasurer's annual report.

Reports of standing committees.

Recess of fifteen minutes, during which time members are requested to cast their ballots for new officers. Ballot-box will be found near registering place.

Second Call to Order.

Report of delegates to State Federation of Women's Clubs.

Appointing of Nominating Committee from the floor for next annual election.

Next annual meeting place named.

Report of Nominating Committee on election.

Appointing of chairman of committee by president.

New business.

Adjournment.

THE NEW YORK STATE MEETING

THE New York State Nurses' Association met in the rooms of the League for Political Education, New York City, Tuesday, October 20, Miss Annie Rhodes, the president, in the chair.

At the morning session the roll was called, the minutes read, and the reports received from the Credentials Committee, the treasurer, and the Examining Board. Great pleasure was evinced at the work accomplished in so short a time by the Examining Board.

During the afternoon session Dr. A. T. Bristow, of Brooklyn, gave a very forceful address on the subject of "Registration and What it has Done for the Medical Profession." Then followed an able address by Miss Delano, superintendent of Bellevue Training-School, subject, "Registration for Nurses." The registration blanks, both for the individual and the training-schools, were discussed and, owing to a difference of opinion as to the exact requirements, the association appointed a delegate to visit the Regents' office, Albany, and inquire into the points under discussion.

The delegate was instructed to report the result of this interview to the secretary of the association, who will issue a circular of information on the subject to all individual members and to the secretaries of the organizations connected with the association.

Such information will also be published through our official organ, THE AMERICAN JOURNAL OF NURSING.

The Nominating Committee appointed from the floor to serve with the three trustees is composed of Mr. Sanford, Miss Wilson, and Miss Samuel. This committee was empowered to nominate three members, from whom the association will elect two at the April meeting from whom the Board of Regents will select one to serve on the Board of Nurse Examiners for five years.

A very recherche luncheon was given at the Manhattan Hotel by the New York Hospital Training-School Alumnae Association to the officers, the members of the Examining Board, and all delegates present.

The meeting adjourned at four P.M., the next meeting being the annual one at Albany the third Tuesday in April, 1904.

JESSIE MCCALLAM, Secretary,
Post-Graduate Hospital.

NOTICE

THE Publication Committee calls attention to the reduction in price of the "Transactions of the Congress of Nurses at Buffalo" from one dollar and twenty-five cents to one dollar per volume. They may be obtained by applying to Miss Tamar E. Healy, 160 Joralemon Street, Brooklyn, N. Y., or to Miss Anna L. Alline, 402 West One-Hundred-and-Twenty-fourth Street, New York City.

M. A. NUTTING, Chairman.

THE trained nurses of Minnesota are forming a State organization to secure registration. At a recent meeting of the Ramsey County Association the following officers were elected: President, Mary Woods; vice-president, Maud Worthington; secretary, Helen Swanson; treasurer, Grace Holms.

REGULAR MEETINGS

DANBURY, CONN.—The regular meeting of the Graduate Nurses' Association of the Danbury Hospital was held at the office of Dr. Annie K. Bailey. After the usual formalities were disposed of the first business in order was the reading of a letter from Miss Linda Richards, "The Pioneer Nurse of America," which is esteemed of much value by the association. This was followed by consideration of the closing song for the association, written by Miss Marion Thornton, of Danbury, which beautifully expresses in a very complete manner the standard of the association. The address of welcome to the new graduates was admirably given by Miss Lulu Comstock. Miss Emma Corbin was no less practical in her presentation of the constitution and by-laws of the association. Miss Margaret Elligott in her response for the Class of 1903 did credit to her class. A short talk was given by the special presiding officer of the association on "Larger Fields of Usefulness for the Trained Nurses," which consisted largely of suggestions advanced by the last International Congress of Nurses; this included, first, the trained nurse in connection with the Board of Health as sanitary inspectors, being so successfully carried out in large cities; second, district or visiting nurses in connection with organized charities. Physicians are staunch supporters of this field of work, especially in England and Germany; third, the trained nurse in connection with the School Board. This feature of work is considered ideal and complete when the physician and nurse work together in school inspection, the nurse, being able to recognize symptoms, reports to the doctor, and thus contagious diseases are much curtailed. A report on this branch of the work says, "The visits of a nurse in a large infants' school have proved most beneficial to the health of the children, so much so it could be wished that the School Board might make such visits universal in their schools in poor localities." Another writer adds, "The public generally have not fully realized the very rapid progress which nursing is passing through in order to keep pace with the demands made upon it by scientific medicine and surgery." The unique work of Florence Nightingale is pronounced the heritage of humanity in that she laid down the laws and principles of nursing on a scientific basis, and that nurses of all nations owe her an inestimable debt. The remarks from friends present were encouraging and inspiring. It was voted that Miss Linda Richards's letter be put upon the permanent records. It was voted that the words of the closing song by Miss Marion Thornton and the tune, "Boylston," be put upon the permanent records. It was voted that the names of Miss Lulu Comstock, Miss Emma Corbin, and Miss Margaret Elligott be placed upon the permanent records in connection with their respective parts. It was voted that the October meeting, which occurs on Sunday, be held at the hospital, and that the special presiding officer arrange the programme for the service. A rising vote of thanks was given to express the pleasure of the association at the presence of friends. The meeting adjourned at four o'clock.

ON Tuesday evening, September 29, the Alumnae Association of the Connecticut Training-School for Nurses had the honor of entertaining the Spanish-American War Nurses at the Nurses' Home, Howard Avenue, New Haven, Conn. Among the war nurses present were Dr. Anita Newcomb McGee, Dr. Laura A. C. Hughes, Miss Lela Wilson, Miss Esther V. Hasson, Miss C. D. Pilgare, Miss Anna D. Schaffer, Miss Rebecca Jackson, Miss L. M. Goodell, Miss M. J. Kennedy,

Miss A. E. Kimper, Miss A. Mackreth, Miss Laura Pearrine, Miss H. M. Wood-
dell, Miss J. E. Bird, Miss E. Suckley, Miss McHugh, Mrs. K. W. Eastman, Miss
Sara R. Langstrom, Miss Susie Saunders, Miss Amy Todd, Miss Grace Merritt,
Miss Alice Matthews, Miss Johanna Schmidt, Miss G. Davies, Miss M. Hazlett,
Miss E. Tuttle, Miss MacPherson, Miss B. Ross, Miss E. Fleming, Miss S. E.
Newell, Miss S. A. Groves, Miss H. Kelley, Miss St. John, Miss Rose M. Heaven.

The alumnae members were assisted in receiving by Miss Emma L. Stowe,
superintendent of nurses at the New Haven Hospital, and by Mrs. Charles B.
Richards, Mrs. Wm. G. Mister, Mrs. Francis Bacon, and Miss Emily E. Betts,
members of the Executive Committee of the Connecticut Training-School.

Miss Albaugh, superintendent of nurses at Grace Hospital, New Haven,
was present with eight nurses.

Many graduates not members of the Alumnae Association attended. Light
refreshments were served. All present spent a very enjoyable evening.

NEW YORK.—A meeting of Camp Roosevelt was held at 155 East Eighty-
third Street, New York, on October 5, at three P.M., with upward of fifteen mem-
bers present, Miss Susie Saunders (captain) in the chair. A report was given
in such glowing terms of the New Haven meeting that those present who had
been unable to attend that auspicious event felt that they had missed a very
great pleasure. It was voted to send a letter of thanks to Adjutant Dyer, of
Washington, from the camp expressing our gratitude to the Spanish War Vet-
erans for the splendid manner in which they entertained us at their "encamp-
ment." It was also decided to send to our president, Dr. McGee, a vote of thanks
for all she had done to promote our pleasure and happiness in New Haven, and
to express to her the honor we felt at having her as the guest of Camp Roose-
velt at the luncheon of the Spanish War Nurses. Before the close of the meeting
refreshments were served by Miss Haltern in her usual hospitable manner.
Camp Roosevelt will meet again on Monday, November 2, at three P.M., at 155
East Eighty-third Street. All members are urgently requested to attend, as
several important matters are to be brought up for discussion.

BOSTON.—The first monthly meeting of the New England Hospital Alumnae
Association was held on Saturday afternoon, October 10, at three P.M. in the read-
ing-room of the Nurses' Club-House. In the absence of Miss Hodgins, the presi-
dent, Mrs. Mary C. Hall, first vice-president, presided. There were fourteen mem-
bers present. The business on hand was discussed, reports were read from the
delegates, and a paper on smallpox was read by Miss Beatty. The paper was
written by Miss L. Furber, a graduate of the Training-School, and now assistant
superintendent at the West Pennsylvania Hospital, Pittsburgh. Many thanks are
due to Miss Furber for expending so much time in gathering statistics for the
paper. The registry has been removed from the hospital to the Club-House,
where nurses will be furnished at any hour of the day or night. The meeting
adjourned at four-fifteen P.M. The members enjoyed a pleasant chat and cup of
tea, after which they spent some time overlooking the house. The meeting of
the stockholders was called to order by the president, Miss A. C. Jammé, at
four forty-five P.M. At seven P.M. all sat down to a typical Saturday New Eng-
land supper (pork and beans).

ORANGE, N. J.—The annual meeting of the Alumnae Association of the Orange Training-School for Nurses was held October 14, 1903, at 449 Main Street, and was well attended. Our delegate to the National Alumnae Association, Miss Cora Hollister, was unavoidably absent, and much disappointment was felt that no report had been sent. We learned with regret that one of our members, Miss Charlotte Layton, was in the Orange Memorial Hospital suffering from an attack of typhoid fever. It was voted that a letter of sympathy be sent to her with flowers. A Reception Committee was appointed to make arrangements for an informal tea to be given to the graduating Class of 1903 in November. Officers for the coming year were then elected as follows: President, Miss Margaret Anderson; first vice-president, Miss J. M. Houlden; second vice-president, Miss M. L. Wehrly; treasurer, Miss Margaret Squire; secretary, Miss Anna Great-singer, after which a vote of thanks was tendered to the retiring officers and the meeting adjourned to enjoy refreshments and a social hour.

PHOENIXVILLE, PA.—The first meeting of Phoenixville and Chester County Nurses was held in Phoenixville Hospital on September 25, 1903, at two o'clock, for the purpose of furthering State registration and for raising the standard of the nursing profession. Miss Constance Curtis, superintendent of the Phoenixville Hospital, was elected president and also elected delegate to the Nurses' State Convention, held in Pittsburg, October 5 and 6. The second meeting was held in the Chester County Hospital, West Chester, Pa., on October 15, at two o'clock, at which it was decided that the organization should be known as the Chester County Nurses' Association. The minutes of the last meeting were read, after which Miss Curtis gave us a very interesting report of the State Convention held in Pittsburg. A special meeting will be held on the first Thursday in February in the Chester County Hospital. It was decided to date the fiscal year of the association from the first Thursday in September.

PHILADELPHIA.—The regular meeting of the Nurses' Alumnae Association of the Methodist Episcopal Hospital of Philadelphia was held in the hospital chapel on September 24, with the president, Miss Townshend, in the chair. Fifteen members responded to roll-call. After the regular business the members were informed that the new alumnae pins were on hand. A committee was appointed to revise the constitution and by-laws. Misses Edith Wetherill and Ella Sauer were appointed delegates to the State Association meeting to be held in Pittsburg. Miss L. Kurath, delegate to the convention in Boston, read a report of that meeting. It was decided that each member be presented with a report of the convention. A very interesting letter was read from Miss M. Cooke, who is in the Buena Vista Sanatorium, San Francisco, Cal.

BROOKLYN, N. Y.—The regular monthly meeting of the Brooklyn Hospital Alumnae Association was held at the Training-School on Tuesday, October 6, at three-thirty P.M., the president, Miss Van Ingen, in the chair. There were fifteen members present. The chairman of the Sick Committee reported one application for sick benefit. A motion was made and carried that a committee be appointed by the president to meet and make final arrangements for the fair, the proceeds of which go to the endowment fund. On account of the small attendance it was decided to reserve the delegates' report of the June Convention in Boston until the next meeting, when a fuller membership will be represented. The meeting then adjourned for refreshments and social intercourse.

ST. CATHARINES, ONT.—The Alumnae Association of Mack Training-School for Nurses held its third annual meeting at Nurses' Home September 7, 1903. The annual reports of the secretary and treasurer were read and approved. Fifteen members were present. Several letters were received from absent members. The most important business was the election of officers for the ensuing year: President, Miss I. Gould; vice-president, Mrs. Parnell; second vice-president, Miss Marriott; secretary-treasurer, M. B. Smith. An association pin was adopted. After the meeting adjourned the nurses were entertained at luncheon. A vote of thanks was tendered to Miss Hollingworth, superintendent, for the hospitality shown to the graduates.

NEW YORK.—The first regular meeting after the vacation—since June—of the New York Hospital Alumnae Association was held on October 14. There was quite a large attendance, and much interest was manifested in the proceedings. The resignation of the secretary, Miss A. L. MacDonnell, was accepted very regretfully. We are sorry to lose such an efficient officer. Misses Adaline Henderson and Anna B. Duncan were appointed delegates to the meeting of the State Association on the 20th. Miss Ada B. Stewart was appointed a delegate to the meeting of the State Federation of Women's Clubs at Utica, N. Y., in November. We were made happy by the presence of Miss Irene Sutcliffe, for the first time in about two years.

BROOKLYN, N. Y.—The regular quarterly meeting of the Graduate Nurses' Association, County of Kings, N. Y., was held October 1, 1903. Notwithstanding the absence of many of the members from the city, the meeting was well attended. Much interest was manifested by those present in the report of the Literary Committee, the chairman, Miss M. O'Neill, reporting that a course of lectures for the coming season on special and general topics was being prepared. The report was accepted. It was voted by the members present that the lectures be given, the subjects and dates for the course to be arranged by the committee and announced at the next regular meeting of the society.

PHILADELPHIA, PA.—The regular monthly meeting of the Alumnae of the University Hospital was held in the Nurses' Home on October 5, the president, Miss Rudden, in the chair. The minutes of the last meeting were read and approved. The regular secretary, Miss Casey, has not yet returned from abroad. The treasurer being still absent on her summer's outing, there was no report. Chairman, Miss A. E. Brobson, of State Association, at meeting in Pittsburg, with Miss Lasater as delegate. Eight members responded to roll-call. Six names were proposed for membership. Very animated discussions on various topics followed, after which the meeting adjourned.

EL PASO, TEX.—The nurses of Providence Hospital, El Paso, Tex., assisted by their friends, gave an entertainment last Wednesday evening, September 13, the proceeds of which they will donate to the furnishing of the operating-room. It was a decided success, both socially and financially, and pleased an audience of over one hundred people. The large male ward looked very attractive decorated with palms and potted plants, and festoons of blue and white ribbon, the class colors, hung from the ceiling, the gas-jets, and every available spot. The nurses displayed more than ordinary talent in the comedies. The sum of ninety-five dollars was realized.

UTICA, N. Y.—The regular quarterly meeting of the Alumnae Association of the Faxon Hospital Training-School for Nurses was held in the parlors of the Florence Nightingale Home for Nurses, September 8, at three-thirty o'clock, with the president, Miss Anna O'Neil, in the chair. Miss O'Neil read a very interesting report of the convention in Boston last June, to which she went as delegate. It was decided to have a course of lectures on parliamentary law during the winter, and Miss Symonds and Miss Roberts were appointed a Committee on Arrangements.

ROCHESTER, N. Y.—The annual meeting of the Rochester City Hospital Alumnae Association was held at the City Hospital on Tuesday, October 13. There was a good attendance and four new members were elected. Several important matters relating to the directory were discussed and acted upon. The election of officers resulted as follows: President, Jean Wilson; first vice-president, Lillie Hambly; second vice-president, Margaret McLaren; recording secretary, M. P. Phelan; corresponding secretary, Mae Connor; treasurer, Emma Knowles.

CLEVELAND, O.—The regular monthly meeting of the Graduate Nurses' Association was held in the Young Men's Christian Association Building on Tuesday, September 29, the president, Miss Brockway, in the chair. The members voted to make a few minor changes in the constitution, also to have it reprinted. Miss Ellis, of Lakeside Hospital, spoke of the need of a central directory for nurses, which led to a lively discussion. This matter was finally placed in the hands of a committee, who will obtain further information and report at the October meeting.

RALEIGH, N. C.—The Graduate Nurses of Raleigh met September 26 in the Lucken Building, and reorganized and adopted a new constitution and by-laws. Hereafter only nurses holding diplomas and having high moral character will be considered eligible for membership. It is hoped this organization will do a great deal to elevate the profession in Raleigh and vicinity. The officers elected were: President, Miss Anna Lee DeVane; vice-president, Miss Birdie Dunn; treasurer, Miss Selma Hayes; secretary, Miss Annie Sturgeon.

BROOKLYN, N. Y.—The Alumnae Association of the Long Island College Hospital held its first meeting for the season on Tuesday, October 13, when there was a large attendance. At the close of the routine business a most interesting paper was read by Miss Waters, of the New York Nurses' Settlement, descriptive of its origin, its subsequent progress, and its present successful operation. After this refreshments were served, followed by an hour's pleasant social enjoyment.

BROOKLYN, N. Y.—The Alumnae Association of the Methodist Episcopal Hospital resumed work in September. The endowment of a room in the new building for the use of nurses was the main subject of the meeting. It was stated that about fifteen hundred dollars had been raised, but no further steps for raising the fund were taken. At Dr. Kavanagh's request the secretary sent a letter to the Board of Managers containing certain requests, all of which will probably be granted.

WILLIAMSPORT, PA.—The regular monthly meeting of the Alumnae of the Williamsport Hospital was held September 24, at three p.m., in the Nurses' Home. Miss Pennington, the president, called the meeting to order. Eleven members responded to roll-call. Several new names were proposed for membership. Miss Kunkle read a very interesting paper on "Pneumonia," after which the meeting adjourned. The next meeting will be held October 29.

MINNEAPOLIS, MINN.—At the annual meeting of the Hennepin County Graduate Nurses' Association the following officers were elected: President, Miss Bertha Erdmann; vice-president, Miss Bertha Johnson; secretary, Mrs. Charlotte Roberts; treasurer, Miss Margaret Kelly. A very interesting lecture course has been prepared for the coming year; also a monthly social meeting has been arranged for.

NEW YORK.—The Class in Hospital Economics has organized and elected Miss Helen M. Kelly president and Miss Maud M. Stotz secretary. The class has fifteen members and every prospect for a bright and profitable year.

BIRTHS

ON June 2, at New Rochelle, N. Y., to Mrs. W. S. Emberson, a daughter. Mrs. Emberson was formerly Miss Gertrude B. Cleveland, a graduate of the Faxon Hospital, Utica, N. Y.

MRS. HUTCHINSON, *née* Jeffrey, a daughter, born in August.

MRS. BROGDEN, *née* Dawes, a daughter, born in August.

MARRIED

IN Rochester, October 14, Miss Nina A. Williams to Dr. Herman C. Merker.

At St. Mary's, Ontario, Can., September 16, Miss Helen C. Ingersoll to Mr. J. C. Mills. Mrs. Mills is a graduate of St. Luke's, Chicago, 1900.

IN Rochester, October 15, Miss Eleanor A. Underhill to Dr. John E. Snodgrass. Dr. and Mrs. Snodgrass will make their home in Auburn, N. Y.

MISS EDITH MARY BOOTH FISHER was married September 24, in Toronto, to Mr. T. Cockburn Kerr. At home after October 15 in Inglewood, Kennell, N. W. T.

At Detroit, Mich., September 22, Mrs. Abby Chapman Stoner to Mr. Edward Fox, of Mt. Pleasant, Pa. Mrs. Fox is a graduate of the Class of 1901 of Farrand Training-School, Harper Hospital, Detroit, Mich.

IN New York, September 29, 1903, Miss Kathleen Galvin, graduate of St. Joseph's Hospital Training-School for Nurses, Paterson, to Dr. Andrew F. McBride. Dr. and Mrs. McBride will reside in Paterson, N. J.

IN Le Roy, N. Y., on Wednesday, October 7, Miss Elizabeth Connor to Mr. Thomas Buckley. Mr. and Mrs. Buckley will reside in Le Roy, N. Y. Mrs. Buckley was a graduate from the Rochester City Hospital Training-School.

MISS MINNA E. MILNE, who expected to take a position in the Samaritan Hospital at Dawson City, was married in Calgary, N. W. T., on August 20 to Mr. Winslow E. Worden, of Slocan, B. C. Mr. and Mrs. Worden will be at home in Slocan, B. C., after November 1.

ON September 24, at the Presbyterian Church, University Place, New York City, Miss Amy J. Baker to Dr. Burt Franklin Jenness, United States Navy. Miss Baker was a graduate of the State Hospital, Tewksbury, Mass., and of the General Memorial Hospital, N. Y.

AT Fulton, N. Y., by the Rev. Nelson Reynolds, Cora Elizabeth Sylvester to Mr. Charles W. Douglas. Miss Sylvester was graduated from Auburn City Hospital Training-School (Auburn, N. Y.) in May, 1898. The following year she took a post-graduate course at the Emergency Hospital, Washington, D. C., since which time she has been engaged in private duty. Auburn loses one of its best nurses. Mr. and Mrs. Douglas will be at home after October 15 at Elmira, N. Y.

OBITUARY

AT the Presbyterian Hospital, New York City, Miss Corinne Manning. Interment at her late home, Maiden Rock, Wis. Miss Manning was a graduate of the Massachusetts General Hospital Training-School, Class of 1891.



FOREIGN DEPARTMENT

IN CHARGE OF
LAVINIA L. DOCK



ORGANIZATION NOTES

THE GERMAN NURSES' ASSOCIATION

THE formation within the past year of a self-governing association of trained nurses in Germany was mentioned in these columns a short time ago, and we learn with interest from Miss Thornton, secretary of the National Alumnae, that the women entrusted with the work of organization had previously written to her to obtain copies of our constitution and by-laws, reports, etc. It would be gratifying indeed if when we gather in Berlin next summer we should find that we had been able to be of even ever so little assistance to our coworkers there, to whom this free organization work has meant almost conducting a revolution, so strong was the opposition and disapprobation from the side of the religious orders and those conducted upon the lines of rigid control of the nurse in every respect, which are the prevalent type in Germany.

One of the leaders of the new movement is Agnes Karll, who has set forth, in an article in *Die Krankenpflege*, the point of view of the "independent" sisters, those who are unwilling or unable to remain bound by the strict discipline and also by the financial narrowness of the life of a Red Cross sister—for it would appear that to be such is almost like taking a vow of poverty, unless one has private means.

She says, among other things: "The much-abused 'free' sisters will soon prove by this association that the heavily punished transgressions, which cause no one so much pain as themselves, are the exception and not the rule; and that a large number of sisters have found it possible to devote themselves heart and soul to the noblest calling open to women and yet, at the same time, fulfil all their family duties, or duties to their own personality. . . . Those of us who have passed through one or another of the (religious or Red Cross) associations hold in great respect their extensive successful work and incalculable services. This appreciation, however, does not blind us to the changed conditions of modern life. The rapid development of the world's economy draws us women also into its vortex, and leaves few suitable for the cloister-like routine of the older associations. There are too many women to-day who are eager to render aid to their fellow-women, but to whom the sphere presented by the Deaconesses' and Red Cross Associations is too narrow. But restrictions and coöperation they cannot do without, and it therefore becomes necessary to create them in a new form. . . . I hope I have made it quite clear how very far we are from any feeling of enmity towards the Deaconesses' and Red Cross Societies. We former Red Cross sisters have for years suffered too much from the often-experienced contempt and intolerance of the deaconesses, and, later, after secession from their associations, from the hostility of the training-schools to us 'free' sisters, not

to be desirous of giving every consideration to the rights and privileges of others. But we demand the same treatment ourselves. The associations refuse to acknowledge our right to the title of 'sister.' This designation, however, is so closely associated with our calling by Germans that doctor and patient alike would be astonished if we proposed to abandon it. Unfortunately, our language does not possess any other term for the educated nurse. We have constantly been abused bitterly for making use of the title of sister and for wearing the uniform, which is indispensable on hygienic grounds, as if we were laying claim to something to which we were not entitled. Circumstances have proved too strong for us, and we have been compelled to do that which for the sake of peace we would gladly have left undone. It would certainly be better for sick humanity if all grades of sick-nursing could work together in amity, as it might easily happen that representatives of the various organizations might one day be called upon to work side by side."

THE AUSTRALASIAN TRAINED NURSES' ASSOCIATION

THE report for the year ending in June, 1903, gives numerous glimpses of things Australasian and of our friend, Miss McGahey. The present membership is six hundred and twenty-one, of whom sixty are medical members. The association has an auxiliary midwifery branch with one hundred and forty-seven members. This midwifery question abroad, as connected with nursing, introduces such an incomprehensible complication that we think American nurses are to be congratulated in having never gotten into it.

The association recognizes sixty-two training-schools as of proper standard: this is exclusive of Victoria and New Zealand, which have, as we know, their uniform requirements for registration. The report says that the smaller hospitals are anxious to be recognized, but that the council realizes that, while it is comparatively simple to insure good theoretical education, the necessary practical experience in all kinds of cases cannot be obtained in them, and that small hospitals should employ only trained nurses, as is done in New Zealand.

The association feels the urgent need of central examination and registration, and is having some correspondence with New Zealand to this end. The organ of the association is the *Australasian Nurses' Journal*.

The association also keeps a register of nurses' homes (this, as we understand it, means for private-duty nurses). The association has had a successful year and has a good financial basis. It seems a little odd that the Australasian nursing associations should all number medical men among their members and, usually, elect them in as officers, but they seem to be the right sort, and so all goes well. No doubt the nurses alone would find it difficult to push their reforms.

LETTERS

HOLLAND has a great number of benevolent and charitable institutions, all remarkably well kept. What I saw of these made me regret much not having enough time in Holland to visit more of them. At The Hague we saw a charming example of the kind of old-ladies' home which they have, and which is common also in Belgium and Germany,—perhaps also in other countries with which I am not yet acquainted,—certainly as different as possible from the somewhat forbidding and shut-in domiciles which we erect at home and call "Homes for

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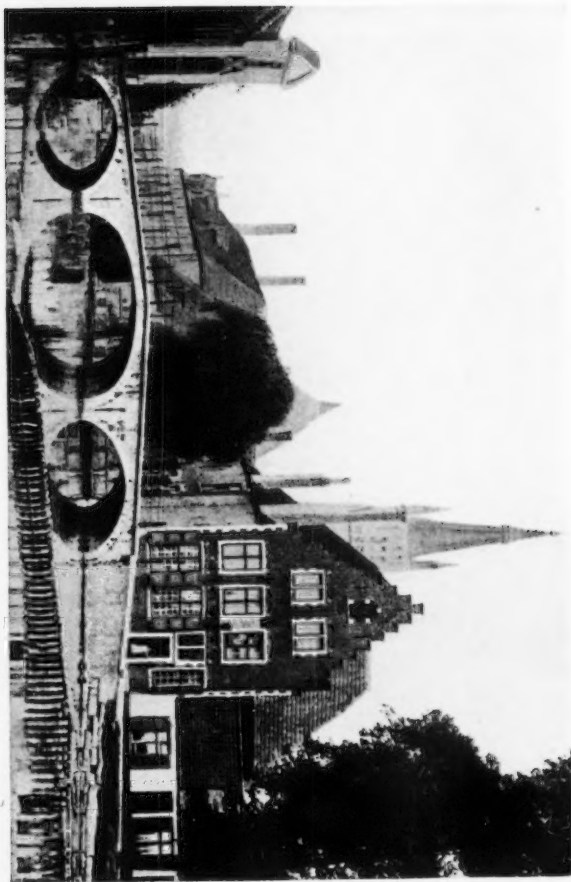
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THE HOME OF THE DAILY NURSING ASSOCIATION, AMSTERDAM





A LACEMAKER OF THE BÉGUINAGE

the Aged." The leading feature of these "Hofje," or homes for old people, is a large piece of ground. In the one at The Hague this was almost as large as a city square. Around three sides of this square were built the prettiest little simple cottages, only one-and-a-half stories high and all under one roof, the old-fashioned gables on this roof and the lines of the small upper windows dispelling any impression of monotony. The fourth side of the square was closed in with what one might call the "administration building," with an old, quaintly fashioned arch and gate through which we entered.

Each old lady—or, in the case of aged couples, each old couple—has a separate little individual home, with kitchen and cookstove, and they do their own housekeeping. Their friends and relatives come to see them, and they have all of the pleasures and privacy and none of the worries of home life outside. Each cottage has a piece of the open square for a garden, enough for flowers, vegetables, and fruit, and every window was lined with rows of flower-pots. The old people upon entering pay a certain sum of money,—or someone does so for them,—and they are then settled for the rest of their lives. If they become feeble or bedridden and have no relatives to attend them, they are removed into infirmaries. Some of these homes are maintained by churches, some by private benevolence or organizations, and some by the city authorities.

It seemed to me it would be so infinitely more sensible and practical in our charities and civic arrangements at home to pay less for huge, expensive buildings for almshouses and homes for the aged, and more for land, and let the inmates do partly for themselves, as they do here. They are assuredly far happier, and then only the quite incapacitated ones need to be carried as a definite burden, whereas we make them all to a certain extent helpless.

We went in and made acquaintance with two or three old ladies. They seemed so cheerful and happy, showed us their vegetables and herbs for all kinds of "teas," and made us up posies from their flower-gardens.

In Bruges, Belgium, we visited a somewhat similar establishment of great interest and of considerable extent called the "Béguinage." This is a most characteristic example of the ways to which the "superfluous woman" on the continent betakes herself, as compared with the ways she disposes of herself at home. As to giving a complete account of the financial management of the "Béguinage," I cannot do it, but here the ground devoted to the purpose is as spacious as a small park. The central open space is a large, grassy common with fine old trees. A church stands at one side of the common, and stretching irregularly around the other three sides are the little dwellings. In the smallest and quaintest are again found the old people. Some of them are lace-workers, and one especially is widely known by her photograph, which appears on a "picture postal-card." This photograph, however, gives no idea of the pretty little room with all its domestic fittings—the tiny fireplace with corner seat and oddly shaped stove, the cooking utensils hanging on the wall, the flower-pots and canary-bird in the window.

On another side of the common is a similar but rather larger and more distinctive-looking row of dwellings, of refined outlines, spotless neatness, and a general air of dignified seclusion. In these cottages lives an order of women who wear a severely conventual dress,—black, with white headpiece and broad white shoulder-circlet,—yet they take no vows of any kind and are not under authority of the church in the customary sense. From what I could learn they seem to be women of good position and have at least some small independent means, and this seems to be a way for them to live according to their own ideas

and, no doubt, with more dignity than they as unmarried women would otherwise have. They pursue various occupations. They make lace, teach children, take care of the aged infirm, and take boarders to help defray expenses. We happened to meet a Holländisch lady who was boarding there, who told us a little about it all.

At a short distance out of Ghent there is another of these "Béguinages," which is said to be as large as a small town and to have a wall and moat entirely around it. This one I did not see, but would strongly advise any of my readers, when visiting Europe, to look up one or two of these feminine establishments and contrast them with their own ways of living.

In Amsterdam I made a visit at the home of the Daily Nursing Association—what we call hourly nursing. Miss Kruysse has previously written us of this work, giving full statistics and descriptions. It is under the auspices of the White Cross Association, of which Miss Kruysse is a director and Miss Stoffers the head of the family, comprising, if I remember rightly, a dozen or more nurses. The house is extremely commodious and pleasantly arranged, and stands on a street with one of those very picturesque but decidedly damp canals running through it, with a heavy border of trees on either side.

Cases by the hour are taken for all classes of paying patients, both poor and rich. No free cases are taken, as the city of Amsterdam supports a group of district nurses to visit the poor of the city. These city nurses get their calls, and (I believe) their orders also, from a city hospital, the Polyclinic. They may live where they please, receiving salaries about equal to three hundred and sixty dollars.

To return to the hourly nursing: it was hoped that the work might become self-supporting, or nearly so, the idea being that the larger fees of the better-class patients would make it possible to extend the work to meet the full demands of the less well off, but so far this hope has not been realized, and this most admirable and well-conducted piece of work remains a financial responsibility to its directors, who certainly deserve more appreciation and encouragement from the citizens for their enlightened endeavor to meet the need and fill the gap which we all deplore and which forms the subject of so much effort and discussion.

I should like to have various medical men, who are severe in their strictures because "nurses do not realize the needs of the family with small income," reminded that in this well-planned Amsterdam undertaking one of the chief obstacles is that "the doctors do forget to send for our nurses, although we are continually reminding them, sending them cards, etc." "Even when they have the very cases that exactly need our services, they do not always send—they don't remember." These things had a very familiar sound, and made the world seem small and all cut out of one piece.

L. L. D.

ITEMS

Una, the organ of the Victorian Trained Nurses' Association, says that in Victoria the medical profession worked harder than the nurses to obtain registration for the latter. Those few physicians who conducted private hospitals offered only slight opposition to the refusal of the association to recognize pupils trained in such institutions. Certainly our best medical men supported us nobly in the United States; now it remains to be seen what attitude the English physician will take towards the registration effort.

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THE BÉGUINAGE, BRUGES



ENTRANCE OF THE BÉGUINAGE

THE nursing-school in Bordeaux, France, under the guidance of Dr. Anna Hamilton, the apostle of nursing reform in that country, held a practical examination for its pupils which must have been what America calls "a mind-opener" for the learned guardians and chiefs-of-staff. It was the first time such a thing had been seen in a French hospital, and with pupil nurses who were all refined and educated young women.

Dr. Hamilton's report on nursing requirements, presented at the Third National Congress of Hospitals and Charitable Institutions, held in Bordeaux in June of this year, has reached us, and we hope to present parts of it later.

MISS CATHARINE WOOD, Miss Amy Hughes, and other staunch war-horses have been fighting the battle for good standards in a movement which has been agitating the rural hospitals in England, where the authorities are desirous of creating an order of nurses which they would call "qualified" nurse—meaning, in short, an untaught and untrained being of inferior social grade. One of the guardians of such a hospital said of candidates for nursing appointments: "Well, the less they knows the better: then us can get them into our ways all the quicker"!

A MATRONS' Council of New South Wales has been organized, of which the secretary is Miss Davies, 140 Phillip Street, Sydney. There is also a Matrons' Council in Holland of some years' standing; then the one in England, and our own Superintendents' Society. Why would it not be a good idea for these councils to affiliate next summer in Berlin? They might help and cheer one another along the thorny path of duty.

WINNIPEG, Manitoba, Canada, has a Graduate Nurses' Association with a membership of sixty-two nurses who are graduates from many different training-schools in the United States and Canada. This association maintains a registry and will in time establish a benefit fund. The secretary is Miss A. Maud Crawford, a graduate of the Toronto General School for Nurses.

MISS SIDNEY J. BROWNE, who was appointed temporary matron-in-chief of the newly reorganized English military nursing service some months ago, has been gazetted matron-in-chief. Those who know Miss Browne speak in the highest terms of her ability and personality.



SERUM TREATMENT OF SCARLET FEVER.—The *Journal of the American Medical Association*, quoting from a Vienna exchange, says: "None of the children of the one hundred and twelve cases in which it was applied died that were injected on the first and second day of the disease, although there were eight very severe cases in the twenty-four injected the second day. Only 17.4 per cent. died of the twenty-three injected the fourth day, and thirty per cent. of those injected the fifth day, after which the mortality rose to fifty per cent. of the four not injected until the ninth day, the latter all very severe cases. A single, large injection the first or second day affords the best results."

CHANGES IN THE ARMY NURSE CORPS



CHANGES IN THE ARMY NURSE CORPS RECORDED IN THE SURGEON-GENERAL'S OFFICE FOR THE MONTH ENDING OCTOBER 13, 1903.

ASHEN, MRS. SARAH C., formerly on duty at the First Reserve Hospital, Manila, P. I., arrived in the United States September 17, discharged.

Bamber, Isabella M., graduate of New York City Training-School, Blackwell's Island, appointed and assigned to duty at General Hospital, Presidio, San Francisco.

Bauer, Mrs. Christiana M., transferred from the General Hospital, Presidio, San Francisco, to duty at Fort Bayard, N. M.

Cashman, Mary L., transferred October 1 from the General Hospital, Presidio, San Francisco, to duty on transport Sherman en route to the Philippines for duty in that division.

Daly, Annie A., transferred from temporary duty at First Reserve Hospital, Manila, to regular duty at the Base Hospital, Iloilo, P. I.

Hall, Mrs. Mary B., transferred from the First Reserve Hospital, Manila, P. I., to duty on transport en route to the United States. Arrived in San Francisco October 12 and reported for instructions.

Hasemeyer, Augusta D., recently on duty at Base Hospital, Iloilo, P. I., discharged in Philippines to be married. Was married on August 5 to Mr. John W. Lattimore, constabulary officer.

Innes, May B., graduate of the Elizabeth General Hospital, Elizabeth, N. J., appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Kennedy, Emma L., recently on sick report at General Hospital, Presidio, San Francisco, discharged.

Lewis, Winifred E., formerly on duty at the General Hospital, Fort Bayard, N. M., discharged.

McIntosh, Margaret, formerly on duty at the General Hospital, Presidio, San Francisco, discharged.

Mann, Mrs. Emilyn P., formerly on duty at the Base Hospital, Iloilo, P. I., transferred to duty on the Sumner en route to the United States via the Suez Canal.

Marker, Ida Maude, transferred from temporary duty at the First Reserve Hospital, Manila, to regular duty at the Base Hospital, Iloilo, P. I.

Mason, Edith A., on leave when transport of October 1 sailed; orders revoked until sailing of the next transport to the Philippine Islands.

Meuser, Gretta Bella, transferred October 1 from the General Hospital, Presidio, San Francisco, to duty on Sherman en route to the Philippines for duty in that division.

Mills, Bessie, transferred from temporary duty at the First Reserve Hospital, Manila, to the Base Hospital, Iloilo, P. I.

Pierce, Margaret, graduate of the New York City Training-School, Blackwell's Island, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Purves, Mary Olive, formerly on duty at the Base Hospital, Iloilo, P. I., transferred to duty on transport en route to the United States. Arrived in San Francisco October 12 and reported for instructions.

Rector, Josephine, arrived in San Francisco September 17, assigned to duty at the General Hospital, Presidio, San Francisco.

Shea, Annie M., transferred from the General Hospital, Presidio, San Francisco, to duty on Sherman en route to the Philippines for duty in that division.

Wills, Edith M., formerly chief nurse at Fort Bayard, N. M., recently arrived in the Philippines, assigned to duty as chief nurse at the Base Hospital, Iloilo.



SOME DANGERS OF THE HOT-WATER BOTTLE AS APPLIED TO THE NEW-BORN.—Dr. Douglas H. Stewart, of New York, has written an article on this subject in the *Medical Record* which is of special interest to nurses. He emphasizes the special danger of burns to infants, and says even after the burn is healing convulsions from this source may cause death.

Intracranial hemorrhage may follow overheating and extensive burning. A child had shown no signs of cerebral trouble until the buttocks and back were burned by a large hot-water bag. The fontanelle began to bulge some thirty-six hours after the burn. A danger most likely to happen when glass bottles are used about the neck is heating of the blood in the carotid arteries. If the temperature of the internal carotids is raised and maintained by heat, these vessels having no branches in the neck, the heated blood is conveyed to the brain and the effect on the medulla and respiratory centre is direct and marked, particularly when heat is applied at the back of the neck at the same time.

A perfectly healthy new-born child was placed in his crib, a hot-water bag underneath him, and a bottle filled with hot water each side of his neck. This was the nurse's precaution, as the room was not very warm. She knew how efficient an ice-bag was when applied to the vessels of the neck, and she supposed heat could be utilized in the same manner with good effect. At the end of about a half-hour, on uncovering the child, I was surprised to find it breathing in a most peculiar manner, similar to the Cheyne-Stokes respiration. This soon ceased after picking up the infant, but a few days later I saw the same sort of dyspnoea in an older child; only here it followed a long-continued poulticing of the neck. The rectal temperature was 104.2°. The poultices were discontinued, and all bad symptoms had disappeared at the time of my second visit—i.e., about two hours after the removal of the poultices.

One reason that such occurrences are not found frequently is that the rubber hot-bag does not readily fit into the neck, but bottles will roll, and will stay snugly against the skin over the vessels of the neck. In my case, as the bottles formed an arch, their tops being in contact, any question of antero-posterior pressure may be dismissed. As to the temperature, I should say that any degree or amount of contact heat sufficient to keep the temperature in the carotids at 110° or over will certainly produce the disturbances described in about thirty minutes. There should always be a thick folded blanket above every hot bag (not necessarily hot-water bag, for the materials may be shot, sand, towels, etc.), and, for that matter, a thick folded towel under every ice-bag.

LETTERS TO THE EDITOR



[The Editor is not responsible for opinions expressed in this Department.]

October 9, 1903.

To the Editor AMERICAN JOURNAL OF NURSING.

My attention has been called to an "Editorial Comment" in the September number of THE AMERICAN JOURNAL OF NURSING, in which, referring to the Spanish-American War Nurses and certain other societies, the statement is made that "the announcements and reports of these organizations are first made through the pages of THE AMERICAN JOURNAL OF NURSING, and that in no other way can members be sure that such reports are authentic." So far as this relates to the Spanish-American War Nurses, the impression conveyed is entirely erroneous, as all reports and announcements are prepared in duplicate, and these identical papers are sent simultaneously to the JOURNAL and to the *Trained Nurse*. By the by-laws of the society the JOURNAL is called the "official organ," but *not* the exclusive organ, and by order of the society the *Trained Nurse* is treated with equal consideration in every way.

In justice to the facts, I am sending this correction to both the magazines concerned, with request that it be published in their November numbers. Yours truly,

ANITA NEWCOMB MCGEE, President S.-A. W. N.

[We never have heard before of a society having two *official* organs. We had not realized that when the order of Spanish-American War Nurses voluntarily voted to make THE AMERICAN JOURNAL OF NURSING its official organ its intention was to withhold from the JOURNAL the right to *claim* to be its official mouth-piece. If this is the intention of the War Nurses, it will become necessary for the JOURNAL to drop the society from the list of organizations which it is supposed to represent.

The JOURNAL cannot consent to be regarded as a *half* organ to any society. It does not object to publication through other channels,—although such is contrary to strict journalistic etiquette,—but it does insist that all official announcements and reports of proceedings must appear first in its pages, and that it *has* the right to its claim to be the only "authentic" channel by which nurses may keep in touch with the work of the societies for which it stands as the *official* organ.—Ed.]

[LETTERS to the Editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the JOURNAL unless so desired.—Ed.]

EDITOR'S MISCELLANY



DANGEROUS COMMUNICABLE DISEASES.—At a recent meeting of the State Board of Health of Michigan the members discussed and approved a circular to be issued entitled "Diseases which Householdors are Required to Report." In this circular the State Board of Health declares consumption, pneumonia, cerebrospinal meningitis, typhoid fever, diphtheria, whooping-cough, measles, scarlet fever, smallpox, glanders, and rabies (hydrophobia) to be dangerous communicable diseases, and therefore "diseases dangerous to the public health" required by law to be reported. This circular sets forth that every case of each of these diseases must be reported to the local health officer by the householder, hotel keeper, boarding-house keeper, or physician. The law is then quoted showing the duty of such persons to so report. The use to be made of such reports is not the same for all diseases, because the manner of spreading and the measures for the restriction are not the same for all diseases. Houses infected with some diseases are to be placarded, with others not. Persons having some of the diseases are to be isolated. Relative to each of those diseases, such facts are published by the State Board of Health, and a pamphlet on any one of these diseases, or on all of them, will be sent to any person interested who requests it from the office of the board at Lansing.

WHILE the city of Boston has been considering the building of a one hundred and fifty thousand dollar hospital for the treatment of tubercular diseases, many families have not waited for a settlement of the question, but have brought into requisition their own roof-tops as a means to a cure of cases of this nature. Not many outside of the medical profession have known of this, but as a matter of interest it may be said that many tenement and private dwelling-house roofs in Roxbury, Dorchester, West Roxbury, South Boston, and in the North and South Ends are now being used, winter as well as summer, for the "open air" remedy for consumption.

SCHOOL WORK.—"A deep impression has been made upon people of the East Side, New York, by the activities of the Health Department. Dr. Lederle has been diligent in excluding from the schools children afflicted with contagious diseases; but he has established a corps of trained nurses, who, when a child is excluded, go at once to the home and tell the parents how to treat the disease. These nurses go back to these homes every few days, and as a result the children return to school usually in a very short time. In the summer these nurses give free treatment to the sick infants of the tenements. Dr. Lederle has established a branch of the Health Department on the lower East Side where poor people can get immediate treatment. He organized a summer corps of physicians to give special service to children suffering from peculiar summer complaints. He established a trachoma hospital, and last year fifty thousand children received free treatment there for this disease,—treatment they never received under Tammany,—and without which many of them were sure to go blind. These measures come into such intimate contact with the people that they will certainly attract votes for an administration providing them."

EDITORIAL COMMENT



IMPORTANT MEETINGS OF THE MONTH

PENNSYLVANIA STATE.

CONVENTION week in Pittsburg, in which, one following the other, the youngest and the oldest of the large organizations which we represent held annual meetings, proved to be an occasion of signal importance in professional progress.

The Pennsylvania State Nurses' Association met at the Hotel Schenley on Monday and Tuesday, October 5 and 6, to complete its organization by the adoption of a constitution and by-laws and the election of officers.

The proceedings of such a meeting are necessarily somewhat dry, although of the gravest importance, and the work was handled with promising intelligence and skill by the officers and members.

The laws governing registration in Pennsylvania are quite unlike those of some of the other States,—New York, for instance,—and the lines upon which the Pennsylvania nurses must act will be in accord with the existing laws now governing the registration of the other professions in the State. Politics, we were told by a medical man, play too great a part in the registration of physicians in the State of Pennsylvania, and the Nurses' Association must be prepared to face political interference supported by a pernicious and malicious group of quack nursing schools, of which there are a great number in Pennsylvania.

In the history of the world no reform has ever been accomplished without opposition, but if the Pennsylvania nurses will take time to educate the public to the idea that the first great benefit to be derived from legislation will be felt by the people, the advantage to the nurses being secondary, we predict a successful issue.

The question of the status of the bill to be presented to the Legislature was not reached at this meeting, but from opinions expressed by individual members we feel quite sure that Pennsylvania will not be satisfied to ask for *less* than the best that has been secured by the other States, and that she may profit by their experience and demand more. This should be the policy of every State now coming into line, for the fact that registration has commenced in other States must make legislative action easier.

We congratulate the Pennsylvania State Nurses' Association upon its excellent beginning, and we predict, if its leadership be wise, a rallying to its support of what is best in the medical profession, as well as the more highly intelligent of the citizens of the State.

THE SUPERINTENDENTS OF TRAINING-SCHOOLS.

Following the Pennsylvania State meeting, on Wednesday, October 7, the American Society of Superintendents of Training-Schools for Nurses convened for its tenth annual meeting.

This society, the first to be organized upon national lines in the United

States, has long ago left the perplexing questions of by-laws, eligibility, etc., in the background, and has reached the point in its development where standards and methods of education, reaching far into the future, and its duties in various public affiliations, are the subjects with which it is concerned.

For several years past many of the superintendents have been actively engaged in the work of the Associated Alumnae and latterly in State organization, and interest in the Superintendents' Society seemed to have flagged, but at the meeting in Pittsburg one was conscious of a closer unity and sympathy among the members than ever before, with an awakening to its responsibilities of leadership in all of the great educational problems at issue. This is its rightful prerogative, both by reason of seniority, and because its membership is composed of women who are engaged in teaching, from whom has emanated all of the advanced ideas in the educational methods of training nurses.

THE PAPERS READ

The papers read at this meeting were of a high order of excellence and will all be given in time in our pages, the two published in this number, "Some Common Points of Weakness in Hospital Construction," by Miss Goodrich, and "The Duty of this Society in Public Work," by Miss Dock, being perhaps the most suggestive. In both the writers emphasize the importance of insisting upon greater recognition in certain lines of work, both practical and moral, by the individual woman, by virtue of her office, and by the society, by reason of its high educational standards. Reprints of Miss Goodrich's paper have been made that members may place a copy in the hands of such among their Boards of Managers as would be interested or profit by the practical suggestions which it contains, and may be obtained by applying to Miss Goodrich, New York Hospital, New York.

The report of the secretary, Miss Nutting, given on another page, is so full and comprehensive an account of the official proceedings that comment is uncalled for.

The fact that the meeting was held at the beginning of the school year, too soon after the return of members from their summer vacation, and at a time when school work was being organized, accounts for the small attendance, and in view of this fact it was decided to try a midwinter meeting the next time.

Washington as a convention city offers peculiar attractions, and in January every superintendent needs a little outing, so that in 1905 there will undoubtedly be a large gathering.

THE SOCIAL SIDE.

How can we find words in which to do justice to the hospitality of Pittsburg? First of all we must pay tribute to the Pittsburg nurses, whose courtesy to the pioneer organization was one of the most gratifying features of the week.

On Wednesday noon the Alumnae Associations of the Allegheny General, the West Penn, the South Side, and the Presbyterian Hospitals gave a most charmingly served luncheon to the superintendents at the Hotel Schenley. There was a delightful informality greatly appreciated by the members upon this occasion, as friends were given the opportunity to seat themselves in groups and visit together, a privilege too rarely enjoyed at our large conventions. There were toasts of a kind to promote merriment, and an atmosphere of cordial good-fellowship pervaded the room.

On Wednesday evening the Alumnae Association of the Pittsburg Training-School gave an elegant reception in honor of the superintendents in the ball-room of the Hotel Schenley. This afforded the visitors an opportunity to meet many of the nurses and people interested in hospital and nursing work, and was in all of the details a most perfectly arranged affair.

The trolley-ride on Wednesday afternoon, showing first the residence section and then the great manufacturing portion of the city, with a visit to the Homestead Steel Works, gave the members something of an idea of the power that places Pittsburg in so influential a position in the commercial world, and the luncheon at Heinz's pickle factory on Friday, followed by an inspection of this great industrial workshop, was an event long to be remembered. The principles of asepsis applied to the problem of pure food was quite a novel idea to most of those present, and the extreme courtesy of the gentlemen who were delegated to entertain the members might serve as an object lesson to some hospitals.

It is impossible to give any adequate conception of the place, even if space permitted. We were impressed with the idea that in just the proportion that mechanical occupation retards brain development, an effort was being made by an unseen but compelling force to stimulate and cultivate the intellectual side of the employé. There was a beautiful hall, seating two thousand, where the best in music, art, and the stage are provided free of cost for the workers, and scattered through the buildings, on stairways and in passage-ways in close proximity to roaring machinery and great cases of merchandise hung beautiful pictures, including copies of the old masters, both religious and secular.

We found ourselves wondering if the antagonism now existing between capital and labor might not be dispelled by such measures in the future.

All of the superintendents and visitors were entertained at luncheon at the West Penn Hospital on Thursday, and the demonstration which followed of new methods and devices used in the New York, the Boston City, the Johns Hopkins, and the Presbyterian Hospital of New York was a most instructive and interesting feature of the programme. We are promised photographs of the appliances shown, most of which are the invention of nurses, so we attempt no description of them here. We feel that the West Penn Hospital, with Miss Russell, the presiding genius, deserve the most unqualified praise for the manner in which the exhibition was presented. The advent of four nurses, with an endless quantity of apparatus, all to be provided with space and service, gave much extra work to someone, and the guests were highly appreciative of the most excellent arrangements provided.

The banquet on Thursday evening, given at the Hotel Schenley by "some of the hospital superintendents," was a beautiful entertainment, and was presided over by Mr. Howells, of the West Penn Hospital, who, with his colleagues, was most solicitous for the welfare and pleasure of the members while in Pittsburg. This was the first time in the history of the Society of Superintendents of Training-Schools that superintendents of hospitals in any city have united to show the members attention of any kind, and in addition to the pleasure of the dinner there was the feeling that a step was being taken that must tend to bring the two most important groups of hospital workers into a more sympathetic relationship in the future than has sometimes prevailed.

The informal reception at the Homœopathic Hospital on Friday afternoon was the last of the social functions. The superintendents were received by the trustees and members of the Ladies' Aid Association, the hospital was inspected,

and one brought away impressions of cordial greetings, pleasant music, and tempting viands partaken of in a setting of harmonious color, a most delightful ending to a very interesting week.

We cannot leave this subject without paying tribute to the president, Miss Giles, who was, according to custom, also the chairman of the Committee of Arrangements. The programme was so perfectly worked out that not one change, either in the business or social calendar, had to be made, and she was untiring in her efforts for the comfort and happiness of her guests. Under her leadership, with all of the resources with which she was able to command, Pittsburg has won first place as a convention city.

THE NEW YORK STATE MEETING.

We have held our pages for the report of the New York State meeting, and we had intended to publish also the address of Dr. A. T. Bristow, given at that meeting on October 20, but the manuscript has not reached us in time, and we are obliged to hold it over until December.

Dr. Bristow is the president of the Medical Society of the State of New York, the organization that gave such cordial and effective aid to the New York Nurses' Association in securing the passage of its bill last winter, and as the representative of that body Dr. Bristow's advice and instruction is of special value to all nurses at this time, when work is beginning in so many different States.

PENNSYLVANIA REPORT NOT IN.

We regret to go to press *without* the official report of the Pennsylvania State meeting held in Pittsburg on October 5 and 6. Such reports are more valuable when made promptly. We appreciate, however, the hard work involved, especially when the society is in the formative stage and the officers are new to such work.

A NEW ALUMNÆ JOURNAL

St. Luke's Alumnae Association has issued the first number of an official organ called *The Alumnae*, with Miss Harriet Fulmer as editor. The first number, a bright little paper, is published at the expense of one member as an experiment, and Miss Fulmer, as the president also of the Alumnae Association, in speaking of this little leaflet says:

"I hope to see established in the near future some sort of a medium in the way of a journal for keeping up the interest and knowledge of the society in the least expensive way possible. Another year this printed matter, in whatever form, could be included in the annual dues. This year it would not be possible to do this, as the funds for current expenses are low. I therefore urge every nurse to give her eight and one-third cents at each meeting and pay for this proposed leaflet for one year. If it does not meet your needs, at the end of the year we could discontinue it, but it does seem as if it might be worth a trial."

Such monthly magazines, devoted exclusively to the interests of a large association, serve as a very stimulating force in promoting interest and holding members together. We congratulate St. Luke's upon their venture and wish them every success in the future.

MORE NEWS

We are anxious to secure more authentic personal and news items about nurses and hospitals, and we again ask those especially interested in the *JOURNAL*

to send such items either to Miss M. E. P. Davis, whose address will always be found in the list of collaborators, or directly to the Editor-in-Chief. To our readers in foreign lands and in isolated places the personal news is a great source of pleasure. Miss Davis has undertaken to gather up such material during the month, and every item sent her will add to somebody's pleasure in the JOURNAL.

CHANGE OF ADDRESS

THE Editor-in-Chief will be moving about during the coming winter,—will sometimes be in New York, Boston, and possibly other places,—but letters and manuscript sent to the address always found in the JOURNAL, Rochester, N. Y., will reach her, as she still claims that city as her home, but at intervals, in order to keep in touch with the new things in the profession, long visits to the large nursing centres must be made.

We ask again that *money* shall be sent directly to the publishing office in Philadelphia, and not to the editor personally, who does not have charge of the subscription list. Recently we were obliged to make a special trip into town from the country to obtain a post-office order, and as we did *not* know the sender, it was only after some trouble that the money was obtained. These seem trifling matters, but when time is valuable they are very annoying, and as in every possible way subscribers have been informed that subscriptions *should be sent to the publishers*, it is carelessness on the part of a subscriber to send money to the editor made to her personal order.

DEATH OF MISS DAVIDSON

OUR readers will learn with sorrow of the death of Miss Anna A. Davidson, whose second paper in "Points About the Private Nurse" was published in the October number of the JOURNAL. Miss Davidson had been nursing a case of typhoid fever under exceedingly difficult conditions, and contracted the disease herself, from which she died in a very short time after being taken to the Presbyterian Hospital, New York, of which school she was a graduate. We did not know Miss Davidson personally, but, judging from the articles given, and the expressions of love and regret which we have heard from her friends and associates, we know her to have been a rare woman and a brave and conscientious nurse.

The two papers published were to have been part of a series that Miss Davidson had offered to write for our pages. In the two papers printed she has given a message to the profession by which we may all profit, and in her death, in which she gave her life for her patient, we have an example of that courage and devotion to duty which are the first essentials in a good nurse.



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